

P14000047596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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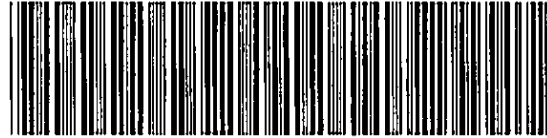
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Chapman Enterprises of Atlantic Beach, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P14000047596

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LYNN ADAMS

(Name of Person)

Beaches Tax Services of N.E. Florida, Inc.

(Name of Firm/Company)

2768 SRA1A # 308

(Address)

Jacksonville, FL 32233-2885

(City/State and Zip Code)

For further information concerning this matter, please call:

LYNN ADAMS

(Name of Person)

at (904) 270-2876

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, Michael A. Chapman, hereby resign as President
(Title)

of Chapman Enterprises of Atlantic Beach, Inc.
(Name of Corporation)

P14000047596, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director) 1/1/18

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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