P15000015225

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





000421491120

01/22/24--01013--004 **35.00



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: OFICE RESIGNATION (Name of Corporation)
DOCUMENT NUMBER: <u>P150000 15 775</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Kate McDonald Sligeant (Name of Person)
On Island, Inc (Name of Firm/Company)
6020 Dinking Lake RA
Sample CL 33957 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (239) 314-9809 (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Ann-Eve McDonald, hereby resign as Prendent (Title)
(Time)
of On Island Inc. (Name of Corporation)
P1500015775 a corporation organized under the laws of the State of (Document Number, if known)
Florida.
(Signature of resigning officer/director)

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