P150000033388

| (Re | equestor's Name) | | - |
|---|--------------------|-----------|------------|
| | | | |
| (Address) | | | _ |
| | | | _ |
| (Ad | ldress) | | |
| (Cit | ty/State/Zip/Phone | #) | _ |
| • | , | , | |
| PICK-UP | WAIT | MAIL | |
| | | | |
| (Bu | isiness Entity Nam | ne) | _ |
| (D- | | | _ |
| (Do | ocument Number) | | . . |
| Certified Copies | Certificates | of Status | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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15 APR 21 PM 4: 33

SEGNETARY OF STATE

C.L.775

TRANSMITTAL LETTER

| SUBJECT: FLORIDA NATURE COAST REALTY, INC. (Name of Corporation) | | | | |
|--|--|--|--|--|
| DOCUMENT NUMBER: P15000023388 | | | | |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| YVONNE SMITH | | | | |
| (Name of Person) | | | | |
| FLORIDA NATURE COAST REALTY, INC. | | | | |
| (Name of Firm/Company) | | | | |
| 5705 NW ZENITH DR | | | | |
| (Address) | | | | |
| PORT ST LUCIE, FL 34986 | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| YVONNE SMITH (Name of Person) at (772-)828-9974 (Area Code & Daytime Telephone Number) | | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | | |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State. | | | | |

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

Amendment Section Division of Corporations

TO:

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

OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE DIVISION OF CORPORATIONS FOR CORPORATION

15 APR 21 PM 4: 33

| , RICHARD J. OLDI | FIELD hereby | resign as PRESIDENT | | |
|-----------------------------------|---------------------|---------------------------------------|--|--|
| , | | (Title) | | |
| FLORIDA NATURE COAST REALTY, INC. | | | | |
| (Nan | e of Corporation) | | | |
| P15000023388 | , a corporation org | anized under the laws of the State of | | |
| (Document Number, if known) | | | | |
| FLORIDA | | | | |

(Stanature 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