## P190000 15574

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100371313221

R NYF ITT

## TRANSMITTAL LETTER

TO: Ame Divi	endment Section ision of Corporations	·
SUBJECT	VORTEIL OF FLORIDA INC	
002001	· · · · · · · · · · · · · · · · · · ·	(Name of Corporation)
DOCUME	NT NUMBER: P19000015574	
The enclose	ed Officer/Director Resignation	for a Corporation and fee are submitted for fili
Please retur	rn all correspondence concernir	g this matter to the following:
RENEE BOU	JTILIER	
	(Name of Person)	
VORTEIL O	F FLORIDA, INC.	
	(Name of Firm/Company	
5344 WOOD	LAND LAKE DRIVE #324	
	(Address)	<del></del>
PALM BEAC	CH GARDENS, FL 33418	
	(City/State and Zip Code)	
For further	information concerning this ma	atter, please call:
RENEE BOU	JTILIER	at () 707-1205 (Area Code & Daytime Telephone Number
	(Name of Person)	(Area Code & Daytime Telephone Number
Enclosed is	a check for \$35.00 made paya	ole to the Florida Department of State.
	ling Address:	Street Address:
	endment Section	Amendment Section
	ision of Corporations	Division of Corporations The Centre of Tallahassee
	Box 6327	2415 N. Monroe Street, Suite 810
rall	lahassee, FL 32314	Tallahassee, FL 32303

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

JASON C MERRITT	DIRECTOR, hereby resign as
	(Title)
VORTEIL OF FLORIDA, INC	
(Nar	me of Corporation)
P19000015974  (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	
	<del>_</del>
- Al	(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