P1906611678.5

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
	ty/State/Zip/Phone	<u>- #)</u>
(0)	ch orditor Equilation of	- ··)
(Br	siness Entity Nan	ne)
(Do	ocument Number)	
	0	
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Onicer:	
	Office Use Onl	lv

1



03/27/24--01006--002 **35.00

DATE STATE



DocuSign Envelope ID: 40213CAB-B35F-4C48-AF8E-C8B31D26DEB2

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

INDIALANTIC VACATION RENTALS, INC.

SUBJECT:

(Name of Corporation)

DOCUMENT NUMBER: P19000040788

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

Please return all correspondence concerning this matter to the following:

Daniel E. Overstreet

(Name of Person)

Indialantic Vacation Rentals, Inc.

(Name of Firm/Company)

1790 Highway ATA

(Address)

Satellite Beach, FL 32937

(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel E. Overstreet

CR2E044 (05/13)

(Name of Person)

at (_____)_____(Area Code & Daytime Telephone Number)

:.)

27 PH 2:

വ

(]]

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

<u>Mailing Address:</u> 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

RICK BERTEL	VICE PRESIDENT	
l,	, hereby resign as(Title)	
INDIALANTIC VACATION RENTAL	.S. INC.	
	ne of Corporation)	
P19000040788 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA		
	<u> </u>	

DocuSigned by: 96984328A666194	AHA		
(Signature of resigning officer/director)	SSEE. FL	PM 2: 54	C

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