

P21000007557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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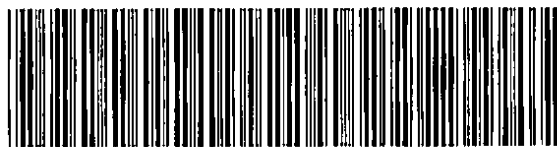
Certificates of Status _____

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J DENNIS

JUN 27 2023

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2023 APR 10 PM 12:42

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COASTAL WINDOW TREATMENTS INC

(Name of Corporation)

DOCUMENT NUMBER: P21000007557

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

Please return all correspondence concerning this matter to the following:

HAILEE CHAPIN

(Name of Person)

COASTAL WINDOW TREATMENTS INC

(Name of Firm/Company)

4311 1ST AVE NE

(Address)

BRADENTON FLORIDA 34208

(City/State and Zip Code)

For further information concerning this matter, please call:

HAILEE CHAPIN _____ at (941) 224-2528
(Name of Person) (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, Hailee Chapin, hereby resign as Vice President
(Title)

of Coastal Window Treatments
(Name of Corporation)

P21000007557, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Hailee Chapin
(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