P21000008054

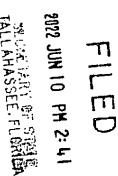
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opeoids instructions to 1 ming Officer.

Office Use Only



700388933127

06/10/22--01029--008 ++35.00





TRANSMITTAL LETTER

Division of Corporations SUBJECT: Delson Institute, P.A. (Name of Corporation) DOCUMENT NUMBER: P21000008054 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Debra Santelli (Name of Person) (Name of Firm/Company) 4528 Mediterranean Circle (Address) Palm Beach Gardens, FL 33418 (City/State and Zip Code) For further information concerning this matter, please call: Debra Santelli (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Debra Santelli (Formerly Debra Delson)	Director, hereby resign as
	(Title)
Delson Institute, P.A.	
(Name	e of Corporation)
P21000008054	, a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314