

P210000806a1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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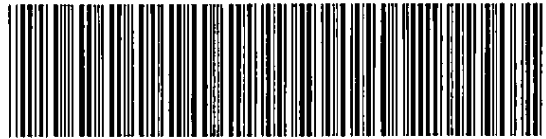
(Business Entity Name)

(Document Number)

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S. CHATHAM  
JUN 29 2023

2023 APR 20 PM 2:53  
S. CHATHAM

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LA PERLA DEL RINCON DEL MAR #3, INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P21000080621  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

TONY PESTANO

\_\_\_\_\_  
(Name of Person)

BSSN

\_\_\_\_\_  
(Name of Firm/Company)

4612 N HIATUS RD

\_\_\_\_\_  
(Address)

SUNRISE FL 33351

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

TONY PESTANO

\_\_\_\_\_  
(Name of Person)

at ( 954 ) 5780016  
(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, JAME L. MAKINO, hereby resign as PRESIDENT  
(Title)

of LA PERLA DEL RINCON DEL MAR # 3, INC  
(Name of Corporation)

P21000080621, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

J. Makino  
(Signature of resigning officer/director)

2023 APR 20 PM 2:54

**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