

P21000090819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

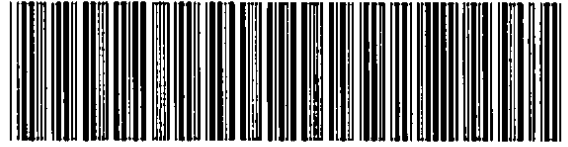
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Resignation of Officer

\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P21000090819

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

Please return all correspondence concerning this matter to the following:

Joseph Carini

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

Florida Oceanside Realty Inc

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

599 S CENTER ST

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

ORMOND BEACH, FL 32174

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

For further information concerning this matter, please call:

Joseph Carini

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

at ( 386 ) 2997711

\_\_\_\_\_  
(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:**

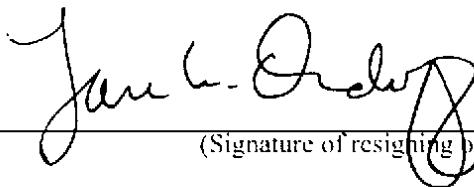
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Lance W Orndorff, hereby resign as Secretary  
(Title)

of Florida Oceanside Realty Inc  
(Name of Corporation)

P21000090819, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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