

P93 0000 68784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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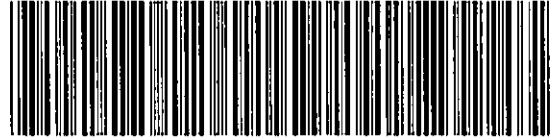
(Business Entity Name)

(Document Number)

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TOLSON, MISSOURI

QA
4/30/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: N.C.M. of Collier County, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P93000068784

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

Please return all correspondence concerning this matter to the following:

Wanda Sowers

(Name of Person)

Douglas A. Wood, P.A.

(Name of Firm/Company)

700 11th Street South, Suite 102

(Address)

Naples, FL 34102

(City/State and Zip Code)

For further information concerning this matter, please call:

Wanda Sowers _____ at (_____) 239-263-7740
(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

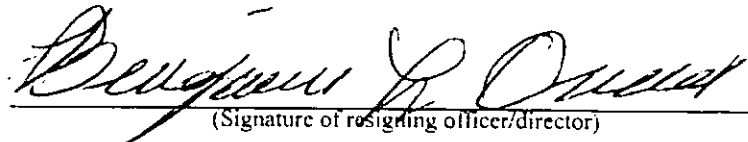
Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Benjamin Owens, hereby resign as Vice President
(Title)

of N.C.M. of Collier County, Inc.
(Name of Corporation)

P93000068784, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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FILED
CLERK OF COURT
TALLAHASSEE, FLORIDA

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