

P93000088413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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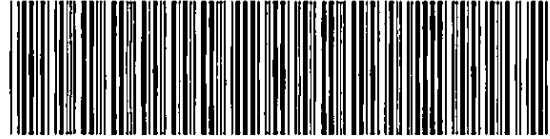
(Business Entity Name)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Orlick & Kasper, MDS, PA

(Name of Corporation)

DOCUMENT NUMBER: P93000088412

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

Please return all correspondence concerning this matter to the following:

Jake Blanchard, Esquire

(Name of Person)

Blanchard Law, P.A.

(Name of Firm/Company)

8221 49th Street North

(Address)

Pinellas Park, FL 33781

(City/State and Zip Code)

For further information concerning this matter, please call:

Jake Blanchard, Esquire at (727) 531-7068

(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, Martin E. Orlick, M.D., hereby resign as President and Treasurer
(Title)

of Orlick & Kasper, MDS, PA
(Name of Corporation)

P93000088412, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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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