

P97000066127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

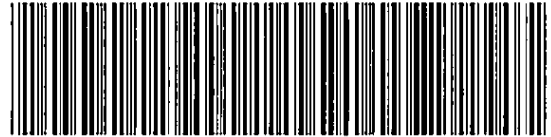
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*Resignation of
Officer*

11/30/23--01010--018 **35.00

FILED
2023 NOV 30 PM 12 32
CLERK OF COURT
JANET L. HARRIS

A. RAMSEY
DEC -18 2023

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EYE CENTER OF ST. AUGUSTINE, P.A.

(Name of Corporation)

DOCUMENT NUMBER: P9700006612-

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Trei Hund, MD

(Name of Person)

N/A

(Name of Firm/Company)

409 Night Hawk Ln.

(Address)

Saint Augustine, FL 32080

(City/State and Zip Code)

For further information concerning this matter, please call:

Ryan King

(Name of Person)

at (352) 219 - 5351

(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**

FILED

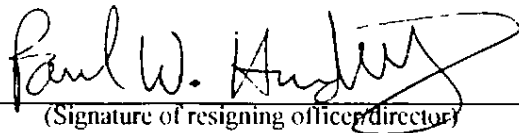
2023 NOV 30 PM 12 32

CLERK OF COURT
JANICE E. JONES

I, PAUL W. HUND III, MD, hereby resign as DIRECTOR
(Title)

of EYE CENTER OF ST. AUGUSTINE, P.A.
(Name of Corporation)

P97000066127, 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