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(Re	equestor's Name)		_
(Ad	dress)		_
(Ad	dress)		_
(Čit	ty/State/Zip/Phone	#)	_
PiCK-UP	☐ WAIT	MAIL	;
(Bu	siness Entity Nam	ne)	<u>:</u> :
· (Do	ocument Number)	· .,	:
Certified Copies	_ Certificates	of Status	· ·
Special Instructions to	Filing Officer:		
	Office Use Onl	v	



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12/03/09--01005--021 **35.00

COVER LETTER

Division of Corporations
SUBJECT: Realty Title Services of Northeast Fluricla, Inc. DOCUMENT NUMBER: P980000 18212
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dona Larson (Name of Person)
Realty Title Services of Northeast Florida Inc.
35 Knight Boxx Rd., Ste. 2
Orange Park, FL 320165 (City/State and Zip Code)
For further information concerning this matter, please call:
Dona Larson at (904) 838-0127 (Name of Person) at (904) 838-0127 (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
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION DEC -3 PH 12: 02

i, Doma	Larson	, hereby resign	as Vice-Pr	esidentDi	rector
-Realty	Title Slrvi	ius of worth	least Flori	da.Inc.	
\frown	12012	, a corporation organized			
Florida		<u>.</u> .			

(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