## P98000059525

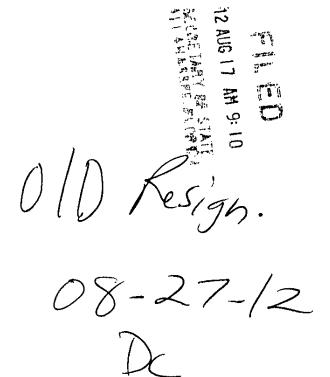
| (Re                                     | equestor's Name)    |           |  |  |
|---|---------------------|-----------|--|--|
| (Ad                                     | ddress)             |           |  |  |
| (A                                      | ddress)             | _         |  |  |
| (Ci                                     | ity/State/Zip/Phone | #)        |  |  |
| PICK-UP                                 | ☐ WAIT              | MAIL      |  |  |
| (Bi                                     | usiness Entity Nam  | e)        |  |  |
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

| SUBJECT: Emerald Coast Office Park   | s, Inc.   |
|--|---|
|  | (Name of Corporation)   |
| DOCUMENT NUMBER: P98000059   | 9525  |
| The enclosed Officer/Director Resignation  | for a Corporation and fee are submitted for filing                                      |
| Please return all correspondence concerning                                      | ng this matter to the following:  |
| Jerry Lambert  |   |
| (Name of Person)   |   |
| Emerald Coast Office Park, Inc.  |   |
| (Name of Firm/Company)   | <del>                                     </del>  |
| 1587 Bal Alex Ave.   |   |
| (Address)  |   |
| Gulf Breeze, FL 32563  |   |
| (City/State and Zip Code)  |   |
| For further information concerning this ma                                       | atter, please call:   |
| Jerry Lambert  | at ( 850 ) 393-6935   |
| (Name of Person)   | at ( 850 ) 393-6935 (Area Code & Daytime Telephone Number)                              |
| Enclosed is a check for \$35.00 made payal                                       | ole to the Florida Department of State.   |
| Amendment Section Ame<br>Division of Corporations Divis<br>Clifton Building Post | ing Address: Indirect Section Ission of Corporations Office Box 6327 Islansee, FL 32314 |

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. Mary B. Owens            | , hereby resign as President                             |                                       |
|-----------------------------|--|---------------------------------------|
|                             |  | (Title)                               |
| of Emerald Coast Office Par | rk, Inc.   |                                       |
|                             | Name of Corporation)                                     | · · · · · · · · · · · · · · · · · · · |
| P98000059525                | , a corporation organized under the laws of the State of |                                       |
| (Document Number, if known) |  |                                       |
|                             |  |                                       |
|                             | <del></del> -  |                                       |

(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