

P 9900062608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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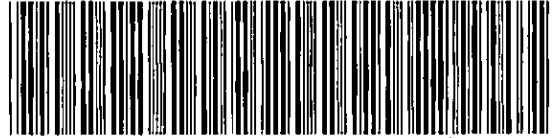
(Business Entity Name)

(Document Number)

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S TALLENT
OCT 24 2017

17 OCT 20 PM 1:29

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O/D - Resign



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2017

SUZANNE M. WILBUR
SUZANNE M. WILBUR D.M.D. P.A.
800 ZEAGLER DR. ST. 420
PALATKA, FL 32177

SUBJECT: SUZANNE M. WILBUR, D.M.D., P.A.
Ref. Number: P99000062608

We have received your document for SUZANNE M. WILBUR, D.M.D., P.A., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 817A00020014

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUZANNE M. WILBUR D.M.D. P.A.
(Name of Corporation)

DOCUMENT NUMBER: P990000 62608

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

Please return all correspondence concerning this matter to the following:

SUZANNE M. WILBUR
(Name of Person)

SUZANNE M. WILBUR D.M.D. P.A.
(Name of Firm/Company)

800 ZEAGLER DR. ST. 420
(Address)

PALATKA FL 32177
(City/State and Zip Code)

For further information concerning this matter, please call:

SUZANNE M. WILBUR at (386) 325 7131
(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
2661 Executive Center Circle
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
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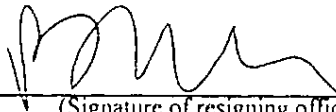
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BRIAN R. WILBUR, hereby resign as SEC / TREAS
(Title)

of SUZANNE M. WILBUR, D.M.D. P.A.
(Name of Corporation)

P99000062608, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.



(Signature of resigning officer/director)

FILED
OCT 20 PM 4:29

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