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PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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### TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ASPECIAL TOF THE PAIM BEACHES, INC. (Name of Corporation)
DOCUMENT NUMBER: V / 45/5
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shannon Foncinal (Name of Person)
A Special TIF the Palm Beaches, Inc.
1000 S+19509 Way #110
West Palm Beach, FL 334// (City/State and Zip Code)
For further information concerning this matter, please call:
Shannon Foneman at 561, 633-8905
(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 | LED FOR A CORPORATION

2020 JUN -5 AM 9: 38

Whom Int. Y of .

	TALLAHASSEE, FLore
1. Shannon Foner	MAN, hereby resign as CO-PNCS/MONT
of A Special T	of the Palm Beaches, Inc
(Document Number, if known)	_ a corporation organized under the laws of the State of
<u> Florida</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