

746396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

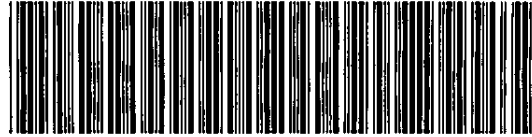
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800292523528

11/21/16--01015--014 **35.00

Old Res

NOV 22 2016

R. V. ...

SECRET
NOV 21 PM 3:44
TALLAHASSEE

FILED

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 1900 Meridian Condominium Association Inc
(Name of Corporation)

DOCUMENT NUMBER: 746396

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

Please return all correspondence concerning this matter to the following:

Patricia Rapan

(Name of Person)

(Name of Firm/Company)

1900 Meridian Ave Apt 202

(Address)

Miami Beach Florida 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Rapan

(Name of Person)

at (**305**) **2150030**

(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

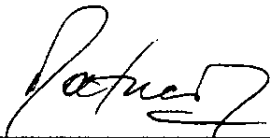
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Patricia Rapan, hereby resign as Director
(Title)

of 1900 Meridian Condominium Association Inc
(Name of Corporation)

746396
(Document Number, if known), a corporation organized under the laws of the State of

Florida



(Signature of resigning officer/director)

16 NOV 21 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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