

NO1000009015

Requester's Name

MARILDE H. Quintana  
900 BAY DR. # 910  
MIAMI BEACH, FL. 33141

City/State/Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 MAR -7 PM 2:28

FILED

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1. \_\_\_\_\_  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

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-03/07/02--01051--007  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

- Walk in
- Mail out
- Pick up time
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

CR2E031(7/97)

Examiner's Initials

3/11/02

o/d Res

\*NOTE CORRECT ASB CORP NAME

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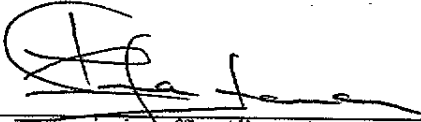
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION**

I, MATILDE M. QUINTANA, hereby resign as Secretary  
(Title)  
of Special City For Special People, Inc.  
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

  
\_\_\_\_\_  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**