## M0300006268

From: Origin ID: HWOA (954)965-5002 Alex Argueza Law Offices of Capita & Duchei 3868 Sheridan Streel	;	
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: PHOENICIAN C	OVE HOMEOWNERS ASSOCIATION, INC.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER:^	10300006268
The enclosed Officer/Director R	Resignation for a Corporation and fee are submitted for filing
Please return all correspondence	e concerning this matter to the following:
MARIE C. CAPITA	
(Name of	Person)
(Name of Firm	n/Company)
8205 PHOENICIAN COURT	Г
(Addr	ess)
DAVIE, FLORIDA 33328	
(City/State and	d Zip Code)
For further information concern	ing this matter, please call:
MARIE C. CAPITA	at ( 954 ) 965-5002 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 to	made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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TALLAHASSEE. FLORIDA

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. KUNGIMON MATHEW	, hereby resign as	TREASURER/DIRECTOR		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Title)			
of PHOENICIAN COVE HOMEOWNERS ASSOCIATION, T.C.				
(Name of Corporation)				
N0300006268 (Document Number, if know	, a corporation organized under the laws of the State of			
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