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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE



COVER LETTER

Division of Corporations
SUBJECT: COUNTHOUSE BUSINESS CENTER CONTOMINIUM ASSN., Luc (Name of Corporation) DOCUMENT NUMBER: 1/050000 10844
DOCUMENT NUMBER: // U JOOU /0879
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Frances Holland, CAM (Name of Person)
Keys Puperty Mant Ent. Inc.
1010 Kenkedy Drive
City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Frances Holland (Name of Person) at (305) 293-8065 × 104 (Area Code & Daytime Telephone Number)
(Attacout & Daytine Telephone Number)

Enclosed is a check for \$35.00 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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, KAREN HEHORICK	hereby resign as	MEMBER - So	<u>=C.</u>
	f Corporation)		m Association Inc.
(Document Number, if known) 10 R 10 A	, a corporation organized unde	er the laws of the State of	0.40% 40%
Jaca (Si	grature of resigning officer/director		MG 27 PH 1:3

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