

**NO60000011591**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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*Mr. Leo Lopez*

**FILED**  
10 DEC 17 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WESTSIDE MASTER HOMEOWNERS ASSOCIATION INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** 206000011591

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

Please return all correspondence concerning this matter to the following:

ROBERT MARKS  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

3157, HAWAIIA CROSS CIRCLE  
(Address)

KISSIMMEE FL 34741  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT MARKS at (407) 925-3354  
(Name of Person) (Area Code & Daytime 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

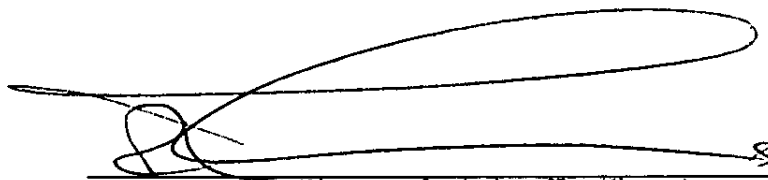
**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**  
10 DEC 17 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, ROBERT MARKS, hereby resign as TD (Title)  
of WESTSIDE MASTER HOMEOWNERS ASSOCIATION, INC.  
(Name of Corporation)

NO6000011591, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA.

  
(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