## NO6000012786

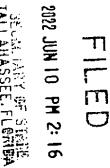
(Red	questor's Name)	
(Add	dress)	
/A -I.	d	
DDA)	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Pur	singer Entity Name	<u> </u>
(Bus	siness Entity Nam	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to F	Filing Officer;	





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## TRANSMITTAL LETTER

<b>TO:</b> Amendment Section Division of Corporations		
The Edges at 4th Street Condomir	nium Association	
3000000	(Name of Corporation)	
DOCUMENT NUMBER: N06000012786		
The enclosed Officer/Director Resignation	on for a Corporation and fee are submitted for filing	
Please return all correspondence concern	ing this matter to the following:	
Veronica Jubera		
(Name of Person)		
(Name of Firm/Compan	<u> </u>	
12722 SW 114th Court		
(Address)		
Miami, Fl. 33176		
(City/State and Zip Cod	le)	
For further information concerning this i	natter, please call:	
Veronica JUBERA MALDONADO	at (at (	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made pay	vable to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
rananassee, FL 32314	Tallahassee, FL 32303	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Veronica Jubera I,	President, hereby resign as
••	(Title)
The Edges at 4th Street Condominium	Association
– (Na	ame of Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
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