N0700002764

(Re	equestor's Name)	
(Ad	Idress)	
(8.1		
DA)	ldress)	
(Cit	ty/State/Zip/Phone #))
PICK-UP	WAIT	MAIL
(D.		
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
,	_	
Special Instructions to	Filing Officer:	
		ļ
		ļ

Office Use Only



600144917936

03/05/09--01010--010 **35.00

09 MAR -5 AM 11: 02
SECRETARY OF STATE
FALLAHASSEE FI OBIN.

S Solver

Ana Maria Martinez 912 Sorolla Avenue Coral Gables, FL 33134 305-322-5466

March 2, 2009

Florida Department of State Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL32301

RE: N07000002764 - Resignation of Director

To Whom It May Concern:

Please accept the attached Officer/Director Resignation for the undersigned listed director of "Villas de Asturias Condominiums Association, Inc." along with Check #7930 in the amount of \$35.00 representing the fees associated with such resignation. I would like to advise the Department of State, Division of Corporations that at no time was I notified that I would be listed as a Director of the aforesaid corporation. Neither was my consent, either express or implied, given to list me as a Director. It appears that I have been fraudulently listed, and as such, I wish to be removed immediately and to have no affiliation with this entity, whatsoever. I am placing the Department of State, Division of Corporations on notice that once removed, I do not wish to be listed as a Director of said Corporation now or at any time in the future.

Thank you for your cooperation on this matter. Should you have any questions, or require any additional information, please do not hesitate to contact me.

Sincerely,

Ana Maria Martinez

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Villas De Asturias	s Condominium Assoc, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: N	07000002764
The enclosed Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Ana Martinez	
(Name of F	Person)
(Name of Firm	/Company)
912 Sorolla Avenue	
(Addre	Ss)
Coral Gables, Fl 33134	
(City/State and	Zip Code)
For further information concerni	ng this matter, please call:
Ana Martinez	at (305) 669-2906 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 m	nade 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, Ana Martinez	, hereby resign as Director	
,	,	(Title)
of Villas De Asturias Condominiu	ım Association, Inc	
	of Corporation)	,
N07000002764 (Document Number, if known)	, a corporation organized under the laws	of the State of
Florida	Signature of fesigning officer/diffector)	FILED 09 MAR -5 AM II: 02 SECRETARY OF STATE TALLAHASSEE, FLORID

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