

N29797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

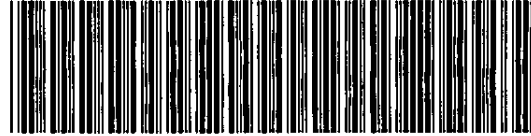
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Parma Estates Homeowners Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N29797

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

Please return all correspondence concerning this matter to the following:

Dorothy C. Gamble
(Name of Person)

Parma Estates HOA, Inc. →
(Name of Firm/Company)

Mailing Address
PO BOX 550526
Fort Lauderdale, FL 33355

13270 SW 29th Ct.
(HOME Address)

Davie, FL 33330-1240
(HOME City/State and Zip Code)

For further information concerning this matter, please call:

Dorothy C. Gamble at (954) 465-7154
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Dorothy C. Gamble, hereby resign as Secretary
(Title)

of Parma Estates Homeowners Association, Inc.
(Name of Corporation)

N29797, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Dorothy C. Gamble
(Signature of resigning officer/director)

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SECRETARY OF STATE

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