## P05000109745

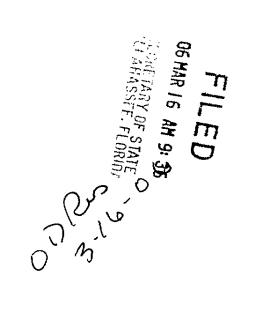
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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Office Use Only



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03/16/06--01024--015 \*\*70.00



## **COVER LETTER**

SUBJECT: Your Neighborhood Realty Group, Inc.	C. Corporation)
DOCUMENT NUMBER: P05000109745	o portuion y
The enclosed Officer/Director Resignation for a Corpo	oration and fee are submitted for filing
Please return all correspondence concerning this matte	r to the following:
Lauren Oliver	
(Name of Person)	
(Name of Firm/Company)	<del></del>
13404 SW 12 Terrace	
(Address)	
Miami, Florida 33184	
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please	call:
Walkiria Oliver	05 <sub>\ 348-0461</sub>
(Name of Person) (Are	348-0461 a Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Flo	orida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Address Amendment Sect Division of Corporations Clifton Building Post Office Box Tallahassee, FL	tion orations 6327

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

hereby resign as Vi	ce-President/Secretary
	(Title)
C.	·
poration organized under	the laws of the State of
of resigning officer/director)	OG MAR 16 AM 9:  OG MAR 16 AM 9:  ANASSFE, FLO
	poration organized under

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