P07000033304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABC MANAGEMENT OF CENTRAL FLORIDA INC.
(Name of Corporation)

DOCUMENT NUMBER: P07000033304

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

Please return all correspondence concerning this matter to the following:

CAROLINA ESTEVEZ
(Name of Person)

ABC MANAGEMENT OF CENTRAL FLORIDA INC.
(Name of Firm/Company)

5445 CAPE HATTERAS DRIVE
(Address)

CLERMONT, FL 34714
(City/State and Zip Code)

For further information concerning this matter, please call:

CAROLINA ESTEVEZ at (352) 536-1669
(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

I, KATHY KOHN, hereby resign as SECRETARY
(Title)

of ABC MANAGEMENT OF CENTRAL FLORIDA INC.
(Name of Corporation)

P07000033304
(Document Number, if known), a corporation organized under the laws of the State of

FLORIDA.

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TALLAHASSEE, 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