U10000010179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

200213493922

11/01/11--01012--009 **35.00

11 NOV -1 AM 8:31

OD

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: V O R MIAMI, INC.
(Name of Corporation)

DOCUMENT NUMBER: N10000010179

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

Please return all correspondence concerning this matter to the following:

DAVID PINA
(Name of Person)

V O R MIAMI, INC.
(Name of Firm/Company)

2801 SW 31ST AVE, SUITE 2B
(Address)

MIAMI, FL 33133
(City/State and Zip Code)

For further information concerning this matter, please call:

ESTON MELTON at (305) 905-2400
(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, ESTON E MELTON III, hereby resign as DIRECTOR
(Title)
a/f/a DUSTY MELTON

of V O R MIAMI, INC
(Name of Corporation)

N100000 10179, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.

E E Melton III
(Signature of resigning officer/director)

11 NOV -1 AM 8:31

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