114000003715

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE TALLAHASSEE, FLORIDA



TRANSMITTAL LETTER

Division of Corporations .
SUBJECT: 3050-52 Day Condominium Association, Inc. (Name of Corporation)
DOCUMENT NUMBER: N14000003715
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Nohra Pelaez
(Name of Person)
(Name of Firm/Company)
210 Shore Drive South
(Address)
Miami, Florida 33133 .
(City/State and Zip Code)
For further information concerning this matter, please call:
Nohra Pelaez (Name of Person) at (786) 295-1088 (Area Code & Daytime Telephone Number)
(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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

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TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, JUAN MANUEL EC	HEVERRI, hereby res	gn as President
_{of} 3050-52 Day Co	ndominium Ass	(Tide)
N1400003715 (Document Number, if known)	Name of Corporation), a corporation organi	zed under the laws of the State of
Florida		·
	(Signature of resigning offic	er/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

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SECRETARY OF STATE
TAIL AHASSEE, FLORID

APPROVED FILED