N93000003227

(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

100291448871

10/24/16--01024--029 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 OCT 24 AM 9:45

OCT 27 2016
C McNAIR

TRANSMITTAL LETTER

FILED
16 OCT 24 AM 9:45
SECRETARY OF STATE
DIVISION OF CORPORATIONS

TO: Amendment Section
Division of Corporations

SUBJECT: SHELBORNE OCEAN BEACH HOTEL CONDOMINIUM ASSOCIATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: N93000003227

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

Please return all correspondence concerning this matter to the following:

Joseph Rosenberg
(Name of Person)

(Name of Firm/Company)

5255 Collins Ave., Apt. 2D
(Address)

Miami Beach, FL 33140
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph Rosenberg at (305) 527-4439
(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
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 OCT 24 AM 9:45

I, Joseph Rosenberg, hereby resign as Director
(Title)

of SHELBORNE OCEAN BEACH HOTEL CONDOMINIUM ASSOCIATION, INC.,
(Name of Corporation)

N93000003227, a corporation organized under the laws of the State of
(Document Number, if known)

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