

553442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

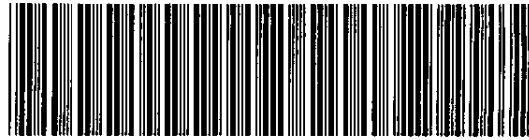
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600200823056

04/13/11--01021--016 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 13 AM 8:43

OD/Res
@ 4/14/11

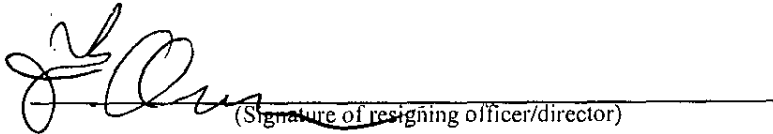
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, FRIEDA OREN, hereby resign as SECRETARY/DIRECTOR
(Title)

of OREN DEVELOPMENT, CORP.
(Name of Corporation)

553442, 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 13 AM 8:43