718170

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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04/25/12--01021--027 **35.00

resignation



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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: THE BATH CLUB, INC.	
SUBJECT	Name of Corporation)
DOCUMENT NUMBER: 718170	
The enclosed Officer/Director Resignation for	a Corporation and fee are submitted for filing
Please return all correspondence concerning t	his matter to the following:
ELADIO IZQUERIDO	
(Name of Person)	
THE BATH CLUB, INC.	
(Name of Firm/Company)	*************************************
5937 COLLINS AVENUE	
(Address)	
MIAMI BEACH FL 33140	
(City/State and Zip Code)	
For further information concerning this matte	r, please call:
ELADIO IZQUERIDO	at (305) 867-5938
(Name of Person)	at (305) 867-5938 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable	to the Florida Department of State.
Amendment Section Amendment Division of Corporations Division Clifton Building Post Off	Address: nent Section of Corporations ice Box 6327 see, FL 32314

OFFICER / DIRECTOR RESIGNATION FILED FOR A CORPORATION AND ADDR 25 PM

SECRETARY OF STATE
TALLAHASSEE. FLORID

I. HOWARD SETLIN	, hereby resign as DIRECTOR	
-7	(Title)	
$_{ m of}^{\scriptscriptstyle ()}$ THE BATH CLUB, INC.		
(Nam	e of Corporation)	
718170 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	<u></u> .	

(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