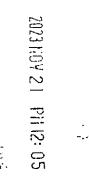


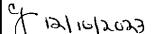
(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							





11/21/23--01020--013 *+35.00





TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: Yendental andminium Owners Association
(Name of Corporation)
DOCUMENT NUMBER: 119519
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Keith Backer
(Name of Person)
Backer About Policikoff + Foelster, LLP
(Name of Firm/Company)
400 S. Dixie Highway State 420
Boca Ration II 33432
(City/State and Zip Code)
For further information concerning this matter, please call:
Lori Espinoza al 305, 1073-4965
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ι, _	Steven Soskin	, hereby resign	as_Secret	tary	
of_	Presidential Cond	ominium	Owners	Å.	<u>a</u> hon
	719519 (Name of Cor	poration) orporation organized	l under the laws of	the State of	
	(Document Number, if known) FLO V 1 da.				
	D 0.			2023 ROV 2 I	* · ·
		e or resigning officer/d	lirector)	PM I2: 05	•

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