721118	
(Requestor's Name) (Address) (Address)	700144365327
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)	03/02/0901011017 **35.00
Certified Copies Certificates of Status	OIVISION OF CORPORATIONS OIVISION OF CORPORATIONS OG MAR - 2 AM 11: 30
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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

Association, Inc. SUBJECT: Gemin, South Condominium (Name of Corporation) 721118 **DOCUMENT NUMBER:** 

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Name of Firm/Company)

000

33021 City/State and Zip Code)

For further information concerning this matter, please call:

rard Walker at 1954 Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Mailing Address:

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

CR2E046(08/05)

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

09 MAR -2 AM 11: 30

I. Edward J. Walker, hereby resign as\_ of Gemini South Condominium A. (Name of Corporation) (Title) 1ssociation. Inc. a corporation organized under the laws of the State of ument Number, if known) ar

Edward M 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