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(K	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I.</sub> Carlos A. Ortega	, hereby resign as	
7	(Title)	-
of Coral Haven Association, Inc.		
(Name o	f Corporation)	
721866 (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida		
	IAS IS	
One	Los A. Ostezva ARR SE	~;
————(S	gnature of resigning officer/director)	
	STATE FLORID	ال

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