725772

(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: Received Faxed corrections to Officer Director name + title on 8/31/2018.

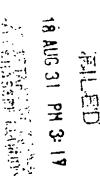
Office Use Only



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OD Resign



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 18, 2018

ALEX KIDD 876 NW 135 TERR

PEMBROKE PINES, FL 33028

NEW ADDRESS 12485.5W 2051 DAVIE, FL 33325

Letter Number: 418A00014774

SUBJECT: PARK SIDE MANOR "A" CONDOMINIUM, INC.

Ref. Number: 725772

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE CLARIFY, IS MAX PULCINI THE SAME OFFICER AS MASSIMO PULCINI? PLEASE AMEND ACCORDINGLY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

www.sunbiz.org

TRANSMITTAL LETTER

то:	Amendment Section Division of Corporations		
SUB	_{JECT:} Park Side M	Manor "A" Cond	dominium, Inc
DOC	CUMENT NUMBER: 7257	72	
The e	enclosed Officer/Director Res	signation for a Corporation	n and fee are submitted for filing
Pleas	se return all correspondence c	concerning this matter to the	ne following:
Ale	ex Kidd		
	(Name of Pe	erson)	
	(Name of Firm/0	Company)	
87	6 NW 135 Terr		
	(Address	s)	
Pe	embroke Pines F	L 33028	
	(City/State and 7	Zip Code)	
For f	urther information concernin	g this matter, please call:	
Ale	ex Kidd	_{at} 954	3471076 e & Daytime Telephone Number)
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)
Encle	osed is a check for \$35.00 ma	ade payable to the Florida	Department of State.
Ame Divis P.O.	ing Address: ndment Section sion of Corporations Box 6327 shassee, FL 32314	Street Address: Amendment Section Division of Corporatio 2661 Executive Center Tallahassee, FL 32301	· Circle

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

(Nan	"A" Condominium, Inc.	,		
(Document Number, if known)	, a corporation organized under the laws of the State of			
orida				
	والمستعرز			
اسر ا استان		8 AUG		

FILING FEE 1S \$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