

745481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

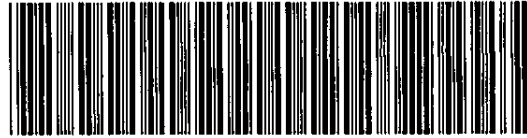
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300267256453

12/12/14--01018--015 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 DEC 12 PM 12:07

C.L.
12-17-14

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

14 DEC 12 PM 12:07

I, ROBYN HENoch, hereby resign as DIRECTOR
(Title)

of VERSAILLES VILLAS ASSOCIATION, INC.
(Name of Corporation)

745481, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Robyn H. Enoch
(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