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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BALDY MARTINEZ P.A.

Account Number : I20110000042

: (305)454-5804

Phone Fax Number

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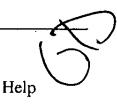
COR AMND/RESTATE/CORRECT OR O/D RESIGN

PELICAN REEF CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Pelican Reef Condominium Association, Inc
(Name of Corporation) DOCUMENT NUMBER: 755539
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Baldy Martinez, Esq. (Name of Person)
Baldy Martinez, P.A. (Name of Firm/Company)
1999 S.W. 27th Avenue, 2nd Floor
Miami, FL 33145 (City/State and Zip Code)
For further information concerning this matter, please call:
Baldy Martinez, Esq. at (305)454-5804 (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 2661 Executive Center Circle Tallahassee, FL 32301

CR2E044 (05/13)

Fax: +18506176380

Page 3 of 3 06/19/2015 3:17 PM

H150001805003

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_I Bobette W. R	ousseau	, hereby resign as President
-; <u></u>		(Title)
of Pelican Reef	Condomini	ium Association, Inc
	(Name of Corpera	
755539	, a corp	oration organized under the laws of the State of
(Document Number, if kr	iown)	•
Florida, effective May	29, 2015	
-		

(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, Plorida 32314

M 7: TE