759711

(Requestor's Name)		
(Address)		
(Address)		
(National)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Dusiness Estitu Nama)		
(Business Entity Name)		
(Document Number)		
and the effect of the contract		
Certified Copies Certificates of Status		
[]		
Special Instructions to Filing Officer:		





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SECRETARY OF STATE

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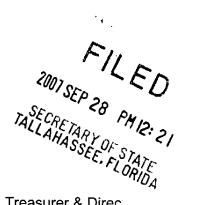
COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: B.T.T. CONDOMIN	IUM ASSOCIATION, INC. (Name of Corporation)
DOCUMENT NUMBER: 759	• /
The enclosed Officer/Director Resi	ignation for a Corporation and fee are submitted for filing
Please return all correspondence co	oncerning this matter to the following:
Alberto Sabater	
(Name of Per	son)
(Name of Firm/C	ompany)
6610 N University Drive, Suite	210
(Address)	
Tamarac, FL 33321	
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
Alberto Sabater	at (954) 724-9640
(Name of Person)	at (954) 724-9640 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mag	le payable to the Florida Department of State.
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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I. Daniei L Bertuceili	, hereby resign as	Secretary, Treasurer & Direc
	, <u></u>	(Title)
of B.T.T. CONDOMINIUM ASSOCIATI	ON, INC.	
(Name of Corpo		,
759711, a co	rporation organized un	der the laws of the State of
Florida		
	. LA I	

FILING FEE IS \$35.00

ignature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314