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COVER LETTER

ARBORGATE AT KENDALL LAKES EAST, CONDOMINIUM 5 ASSI (Name of Corporation) 760899 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NELDA LAWRENCE, ESQ. (Name of Person) LAW OFFICE OF NELDA LAWRENCE, P.A. (Name of Firm/Company) 9780 EAST INDIGO STREET, STE. 202 (Address) PALMETTO BAY, FLORIDA 33157 (City/State and Zip Code) For further information concerning this matter, please call: NELDA LAWRENCE, ESQ. (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Street Address: Mailing Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JULIE QUILES	, hereby resign as_	PRINCIPAL/DIRECTOR	
		(Title)	
of ARBORGATE AT KENDALL LA	KES EAST, CONDOMIN	NIUM NO. 5 ASSOCIATION	
(Name of	Corporation)		
760899 (Document Number, if known)	a corporation organized un	der the laws of the State of	
FLORIDA			
	Suls nature of resigning officer/direc	FILE DE 3: 03 ZOOB JUN 18 PH 3: 03 SECRETARY OF STATE TALLAHASSEE, FLORIO	

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