76335

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone	<i>⇒#</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		·
		:

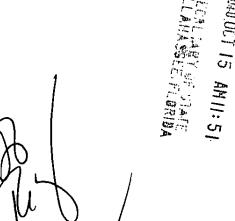
Office Use Only

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per 10/11/10

COVER LETTER

Amendment Section Division of Corporations TO: The Foursome at Atlantis (Name of Corporation)

DOCUMENT NUMBER: 762395
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
James Steinhauser
(Name of Person)
The Foursome at Atlantis
(Name of Firm/Company)
316 Orange Tree Dr.
(Address)
Atlantis ,FI 33462
(City/State and Zip Code)
For further information concerning this matter, please call:
James Steinhauser at (561) 301 9294
(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:
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

of THE FOURSOME AT ATLANTIS CONDO ASSOC, INC (Name of Corporation)	
01	
(Name of Corporation)	
762395, a corporation organized under the laws of the State of (Document Number, if known)	
FLORIDA PLUS IN THE PROPERTY OF THE PROPERTY	- construction of the cons
(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