765221

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(City	//State/Zip/Phone	e #)
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Certified Copies	Certificates	of Status
Special Instructions to F	ilina Officer:	
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Office Use Only



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T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Villas of Windmill Point II (Name of Corporation)
DOCUMENT NUMBER: 765221
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph Kevin Mabe (Name of Person)
(Name of Firm/Company)
174 Sw Colesbury Ave (Address)
Port St. Lucie F1 34953 (City/State and Zip Code)
For further information concerning this matter, please call:
Joseph Kevin Mabe at (917) 574-3660 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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OFFICER / DIRECTOR RESIGNATION2 FEB -3 PM 12: 57 FOR A CORPORATION

SERIETARY OF STARS

I,	Joseph Keu	in Mobe, hereby resign as Director (Title)
of_	Villas of	Windmill Point II Property Owner's Association. Name of Corporation) Inc.
	765221 (Document Number, if known)	, a corporation organized under the laws of the State of
	Florida	

(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