

# H24523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

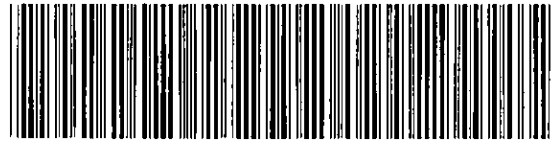
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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: All Florida Properties, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: H24523

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Judith Maiorani  
(Name of Person)

All Florida Properties, Inc.  
(Name of Firm/Company)

1071 PORT MALABAR BLVD. NE #201  
(Address)

Palix Bay, FL 32905  
(City/State and Zip Code)

For further information concerning this matter, please call:

Judi Maiorani at ( 321 ) 626-5232  
(Name of Person) (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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Judith M. Maiorani, hereby resign as Vice President  
(Title)

of ALL FLORIDA PROPERTIES, INC.  
(Name of Corporation)

H24523, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Judith M. Maiorani  
(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

**FILED**  
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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA