## 176831 Requester's Name

CR2E031(7/97)

Ms. M. Miron 333 Sunset Dr Apt 207 Fort Lauderdale, FL 33301

> 000004732720--0 -12/19/01--01043--015 \*\*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Office Use Only

Examiner's Initials

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
reosporation realizer	(Doddiene H)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy  Photocopy  Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

## OFFICER / DIRECTOR RESIGNATION

1, <u>Ibel</u>	Miron	, here	eby resign as_	President (Title)	·	
of AFFORD	ABLe	(Name of Corporation)				
a corporation orga	nnized under th	he laws of the State of	Floride			
and affirm that the	e corporation h	nas been notified in writ	ing of the resi	gnation.		) '
	9	(Signature of resigning	ng officer/directo	r)	DEC 19 PH 2: 3	

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314