

N02000005844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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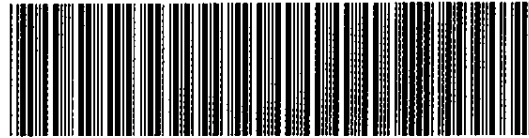
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign.

TB

DEC -9 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: M Resort Residencies Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N02000005844

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

Please return all correspondence concerning this matter to the following:

STEVEN KRUSS
(Name of Person)

(Name of Firm/Company)

1519 PRESIDENTIAL WAY
(Address)

N. MIAMI BEACH, FL 33179
(City/State and Zip Code)

For further information concerning this matter, please call:

STEVEN KRUSS at (305) 302 2192
(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**

FILED
2010 DEC -7 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Steven Kruss, hereby resign as Director
(Title)

of M Resort Residences Condominium Association, Inc.
(Name of Corporation)

N02000005844, a corporation organized under the laws of the State of
(Document Number, if known)

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