

N03000002523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800148524978

04/08/09--01033--004 **35.00

FILED
09 APR - 8 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

©

010 Res
ACG
4/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ponza Place Home Owners Association
(Name of Corporation)

DOCUMENT NUMBER: NO3000002523

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

Please return all correspondence concerning this matter to the following:

Linda Grimison
(Name of Person)

Ponza Place Home Owners Association
(Name of Firm/Company)

4095 Ponza Place
(Address)

hialeah fl 33462
(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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**

I, Linda Grimeson, hereby resign as President
(Title)

of Ponza Place Homeowners Association
(Name of Corporation)

1103000002523, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Linda Grimeson
(Signature of resigning officer/director)

FILED
09 APR -8 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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