

(Re	questor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



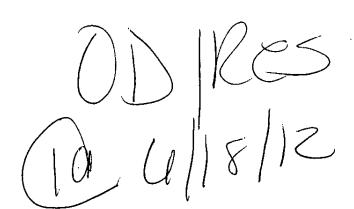


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SECRETARY OF STAIN ON OF CORP ON A PROMI



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Villa Laguna Homeowners Association
(Name of Corporation)
DOCUMENT NUMBER: N04000002758
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filir
Please return all correspondence concerning this matter to the following:
Joe Pennock
(Name of Person)
Villa Laguna Homeowners Association
(Name of Firm/Company)
1226 NE 18 Ave #2
(Address)
Fort Lauderdale, FL. 33304
(City/State and Zip Code)
For further information concerning this matter, please call:
Joe Pennock at (616) 560-5498 (Name of Person) (Area Code & Daytime Telephone Number
(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

Tim Maher	, hereby resign as Treasurer (Title)
Villa Laguna Homeowners A	
(Nar	ne of Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
lorida	,
	//

(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