(City/State/Zip/Phone #)							
(Business Entity Name)							
(Document Number)							
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Special Instructions to Filing Officer:							

Office Use Only



200285517192

FILING CANCELLED RETURNED CHECK

05/13/16--01009--004 **70.00

MAY 17 2016

R. WHILE

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: 317 Northeast second street homeowners association (Name of Corporation)	m
DOCUMENT NUMBER: <u>NOS 00005288</u>	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Marie of Person) Wagas (Name of Person)	
(Name of Firm/Company)	
317 WE 2rd S+ #2 (Address)	
Hallandale, FL, 33009 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (
Enclosed is a check for \$35.00 made payable to the Florida Department of State.	
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION FILING CANCELLED RETURNED CHECK

I,	Marlo	Plonas	, hereby resi	gn as <u>V</u> ICC	Presid	Lert/	<u>SC r</u>	e ta
of <u></u>	317 NE	Second (Name of Corpor	SWeet ration)	Homes	sners .	Associ	<u>at</u> h	,^ن
	N 0500000 (Document Number, i	> 5 2 8 8 , a corp	poration organiz	zed under the	laws of the	State of		
		·						
		MV	21~					
		(Signalure	of resigning office	r/director)			16 HAY	أمضه أدومهم
						Action Comments	13 AM	
		FILING	FEE IS \$35.00)		31	դ :8	

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314