NOSOOO 11757

(Requestor's Name)				
(Ad	idress)			
,	·-··-,			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	- #)		
PICK-UP	WAIT	MAIL		
	.•			
		 		
(Bu	usiness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	Certificates	of Status		
	_			
Ý				
Special Instructions to	Filing Officer:			
		:		
		-		

Office Use Only



300265522473

10/20/14--01003--018 **35.00

PILED

POCT 20 MIII: 52

OCT 3 0 2014

C. CARROTHERS

TRANSMITTAL LETTER

•	
SUBJECT: Valencia towers condo. associ	att
(Name of Corporation)	
DOCUMENT NUMBER: N 050 000 11757	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing	g.
Please return all correspondence concerning this matter to the following:	
Christing Sanabrig (Name of Person)	
OPTIMUS Property Mgt, LLC (Name of Firm/Company)	
1275 W 47 P) #-310 (Address)	
Halcan Fl 33012 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Christing at (30) 8200480 (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
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E044 (05/13)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>H</u>	arına	pardo	, hereby resig	m as Treasurer (Title)
of	Vale		TOWERS	condominium
		(Name	of Corporation)	,
N050000 11757		_, a corporation organized under the laws of the State of		
	ocument Numb	,		
FIC	orido	λ.		

Signature of resigning officer/director) 1913/14

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