

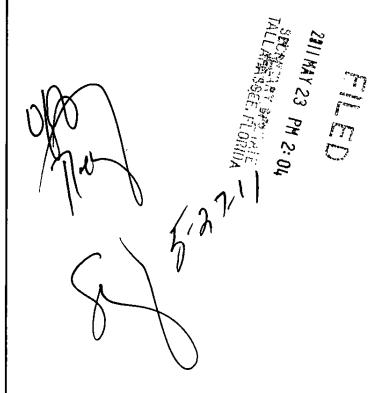
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TO:	Amendment Section
	Division of Corporations

SUBJECT: VICTORIA BREEZES CONDOMINIUM ASSOCIATION, INC.
(Name of Corporation)
DOCUMENT NUMBER: N06000005615
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ALVARO CASTILLO
(Name of Person)
ALVARO CASTILLO B. P.A.
(Name of Firm/Company)
1390 BRICKELL AVENUE SUITE 200
(Address)
MIAMI FLORIDA 33131
(City/State and Zip Code)
For further information concerning this matter, please call:
ALVARO CASTILLO at (305) 371-5540 (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

I, JOHN M. THOMSON , hereby resign as DIRECTOR/PRE		
	(Ti	tle)
of_ VICTORIA BREEZES CONDO		,
(Name e	(Corporation)	
N0600005615 , a corporation organized under the laws of the State of (Document Number, if known)		State of
FLORIDA	÷	
	gnature of resigning officer/director)	2011
	ohn M. Thomson	2811 MAY 23
		FI 2: 04
FI	LING 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