## ND7000003630

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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W. Carlot

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	DR A CORPORATION
Sahar Hanafi	, hereby resign as Treasurer & Director (Title)
	e Condominium Association, Inc.
	in or corporation)
N0700003630 (Document Number, if known)	, a corporation organized under the laws of the State of

## **FILING FEE 1S \$35.00**

(Signature of resigning officer/director)

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

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