ND8356

(Rec	uestor's Name)	<u> </u>
(Adc	tress)	
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(Cit)	//State/Zip/Phone	· #)
		MAIL
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(Doo	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	<u> </u>
	Office Use On	lv



09/13/13--01020--016 **35.00

13 SEP 13 KH 8: 38



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

Protessional Building Condominium Hosod. Inc (Name of Corporation)) NO FOR SUBJECT: -08356 **DOCUMENT NUMBER:**

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John G. Vega (Name of Firm/Company) SA 2666 AIRPORT Rd S. AD Les FD 34112 (NUV/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (239) 659-3251 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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I, SCOLE L. W iesen, hereby resign as Manager (Title) M nium Assoc,-4-04 essiona Bu of Voctors (Name of Corporation) 835 __, a corporation organized under the laws of the State of Document Number, if known) Wri C

(Signature of resigning officer/director)

13 SCF 13 EH 8: 39

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