

N110000010495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

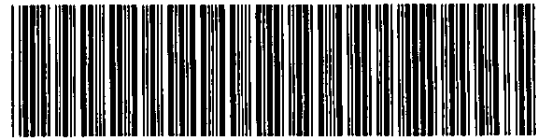
(Business Entity Name)

(Document Number)

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*S/O Pres.*

APR 18 2013

R. WHITE

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 APR 10 AM 9:46

FILED

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Friends of Viera Wetlands, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** N11000010495

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

Please return all correspondence concerning this matter to the following:

Patricia Corapi

(Name of Person)

(Name of Firm/Company)

2700 N Hwy A1A #21-103

(Address)

Indialantic FL 32903

(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Corapi

(Name of Person)

at ( 321 ) 431-6801

(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:**

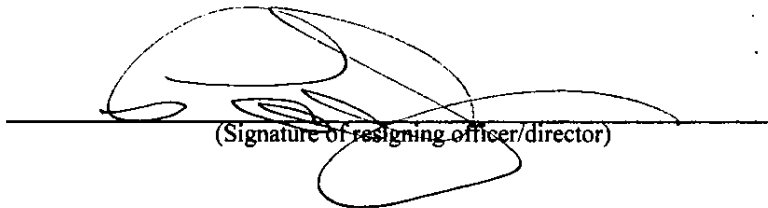
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Patricia Corapi, hereby resign as Treasurer  
(Title)

of Friends of Viera Wetlands, Inc.  
(Name of Corporation)

N11000010495, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(Signature of resigning officer/director)

**FILED**  
**13 APR 10 AM 9:46**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**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