## Maxxx06967

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(City/State/Zip/Phone #)	
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(Business Entity Name)	
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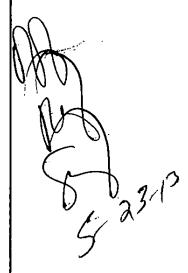


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OIVISION OF CORPORATIONS

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## TRANSMITTAL LETTER

Division of Corporations SILVIA CONDOMINIUM ASSOCIATION INC. (Name of Corporation) DOCUMENT NUMBER: N12000006967 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **JAKE VAN PARYS** (Name of Person) DEAN J. TRANTALIS, ESQ. (Name of Firm/Company) 2255 WILTON DRIVE (Address) WILTON MANORS, FL 33305 (City/State and Zip Code) For further information concerning this matter, please call: JAKE VAN PARYS Area Code & Daytime Telephone Number) (Name of Person)

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

TO:

Amendment Section

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, MATTEO CORNAL	, nercoy resign as	_
"SILVIA CONDOMIN	IIUM ASSOCIAITON, INC.	
	of Corporation)	ı
N1200006967 (Document Number, if known)	_, a corporation organized under the laws of the State of	
FLORIDA	-·	<b>2</b> /
Mode	ignature of resigning officer/director)	SECRETARY OF STATE VISION OF CORPORATIO

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