N 33219

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700346065447

06/15/20--01026--029 **35.00

2020 J.T. 15 PH 3: 33

JUL 07 2020 I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

DUTHIE-FREEMAN CENTRE CON SUBJECT:	IDOMINIUM	ASSOCIATION, INC.
(Name of Co	rporation)
DOCUMENT NUMBER: N33219		
The enclosed Officer/Director Resignation fo	or a Corpora	ation and fee are submitted for filing
Please return all correspondence concerning	this matter	to the following:
Janice Hustad		
(Name of Person)		
Duthie-Freeman Centre		
(Name of Firm/Company)		
7825 Preserve Dive		
(Address)		
West Palm Beach, FL 33412		
(City/State and Zip Code)		
For further information concerning this matter	er, please ca	all:
Janice Hustad	561 at (689-9600)
(Name of Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable	to the Flor	ida Department of State.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Carol Warner's name listed as a director on the renewal on 3/9/20 was a scrivener's error.

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Carol Warner	Director, hereby resign as(Title)
_DUTHIE-FREEMAN CENTRE CON f	
(Na	une of Corporation)
33219	, a corporation organized under the laws of the State of
(Document Number, if known)	· · ·
lorida	
	 ·
	(Signature of resigning officer/director)
سنديانيك	(Signature of resigning officer/director)

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