N92000000686

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: No lessolage Enformentum essociation (Name of Corporation) DOCUMENT NUMBER: N9200000 686
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: Concerning this matter to the following: Concerning this matter this matter to the following: Concerning this matter this matter to the following: Concerning this matter thi
(Name of Firm/Company) 100 Incoln Road # 910 (Address) Mean Beach, H. 33139 (City/State and Zip Code)
For further information concerning this matter, please call:

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Barbara GRANT, hereby resign as Vice	President (Tide)
of The Decoplage Condominium A	seociation) Inc
N920000686 a corporation organized under the law (Document Number, if known)	s of the State of
tlorida.	F 10 FEB
	TILED -4 AMIO: NST OF ST. NSSEE, FLO
(Signature of resigning officer/director)	ORIDA

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