## N9900006101

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Day to Friedland)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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C.COULLIETTE

DEC 1 3 2010

**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Fountains of Living, I	nc.
	(Name of Corporation)
DOCUMENT NUMBER: N980	00006101
	nation for a Corporation and fee are submitted for filing
Please return all correspondence con	cerning this matter to the following:
Peter C. Versage, Jr.	
(Name of Perso	on)
Fountains of Living, Inc.	
(Name of Firm/Cor	npany)
16700 SW 272nd Street	
(Address)	
Homestead, Florida 33031	
(City/State and Zip	Code)
For further information concerning to	his matter, please call:
Elayne Versage	at ( 305 ) 394-7393 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
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

CR2E044(09/05)

12/6/10

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Peter C. Versage, Jr.	hereby resign as President	hereby resign as President	
4,	,y 10.181 to	(Title)	
of Fountains of Living, Inc.			
(1	Name of Corporation)		
N99000006101	, a corporation organized under the laws of the State of		
(Document Number, if known)			
Florida			

(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