P00000089354

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



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FILED
2008 SEP 17 AH IO: 24
SECRETARY OF STATE

officer Resignation

COVER LETTER

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SUBJECT: BOCA FINANCE CORPORATION (Name of Corporation)
DOCUMENT NUMBER: P0000089354
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
SEAN POWERS (Name of Person)
(Name of Firm/Company)
1527 SW 1ST AVE
(Address) BOCA RATON FZ 33432 (City/State and Zlip Code)
For further information concerning this matter, please call:
Sean Powers at (16/) 654-4946 (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

TO: Amendment Section

Division of Corporations

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	DIRECTOR RESIGNAT A CORPORATION	TON TASECRETATION
SEAN POWERS	, hereby resign as	T/S/D TORICA (Title)
of BOCA FINAN	VCE CORPORA	770N.
P000000 8 9 3 5 4 (Document Number, if known)	_, a corporation organized under	the laws of the State of
FLORIDA	_•	

gnature 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