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Division of Corporations
SUBJECT: TOP OF SOUTH FLORIDA INC. (Name of Corporation)
DOCUMENT NUMBER: _ f 02 0 0 0 0 8 8 5 9 1
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
STEPHEN W. AMAN210 (Name of Person)
To P OF SOUTH FLORIDA INC (Name of Firm/Company)
101 NW 15 Th PLACE (Address)
POMPANO BEACH FL 33060 (City/State and Zip Code)
For further information concerning this matter, please call:
Lawrence N. Reyns/Ls CFA at (954) 480-9477 (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 Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO: Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

£ (117)

I,	SALVATORE	AMANZIO.	, hereby resign as	PresilenT	3 Dire	cTor
of_		South FLOR (Name of Corpo		·		,,
Po	(Document Number, i		poration organized ur	der the laws of the	: State of	
<u>-</u>	FLORIDA	<u>=</u>			,	
		(Signature	of resigning officer/direc	tor)	07 SEP 27 PM 12: 4 SECRETARY OF STA TALLAHASSEE. FLOR	T
		FILING	FEE IS \$35.00		PH 2: 4 I OF STATI E. FLORIE	MD

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314