## P0300067269

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of	of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

APPRUVED AND



## **COVER LETTER**

Division of Corporations
SUBJECT: Maliby Pool Services #3 Inc
DOCUMENT NUMBER: P 0 3 0000 67 2 69
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
Maliby Pools Services # 3 (Name of Firm/Company)
12260 SW 8th st Unit 134 (Address)
MIAMI FIDRICIO 33139 (City/State and Zip Code)
For further information concerning this matter, please call:
LISSEHE M. Ore 11000 at (313) 334 0549 (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

TO: Amendment Section

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>LIS</u>	sette M. Orel	land, hereby	resign as Pres	\Sec\	DIR
				(Title)	•
of	MAlibu		Service	3 # 3	<u> I</u> nc
	(Name of	Corporation)	-		, , , , , , , , , , , , , , , , , , ,
100 (Docume	20067269_, ent Number, if known)	a corporation org	anized under the laws	s of the State of	
FIC	DRIDA				

(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

10 MAR 22 AH II: 20 SECRETARY OF STATE FALL AHASSEE, FLORIDA