# P03000101794

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SHUNLIFSEE FLORIDA

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#### TRANSMITTAL LETTER

SUBJECT: SEE ATTACHED FORMS
(Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LYLE CHARIFF
(Name of Person)
<u>and the second of the second </u>
(Name of Firm/Company)
4025 NE 2NO AVE SUITE 100
(Address)
MIAMI FC, 33137 (City/State and Zip Code)
For further information concerning this matter, please call:
Lyle Charty at (305) 776-7600  (Name of Person) (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 409 E. Gaines Street Tallahassee, FL 32399

Amendment Section Division of Corporations

TO:

CR2E044(11/02)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

## FILED

# OFFICER / DIRECTOR RESIGNATION 03 DEC -1 PM 4 09 FOR A CORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	, hereby resign a	s VICE PRE	SIPENT/	S&C	
T 407 me of Corporation	CORP.		;	. ·	- <del>122</del>
a corpor	ation organized	under the laws of	the State of		
•		. <del>-</del>		•	
(Signature of r	esigning officer/dir	ector)	*	,÷	.君····;
	T 407 une of Corporation a corpor	T 407 CORP ume of Corporation)	T 407 CORP  me of Corporation) , a corporation organized under the laws of the laws	THOT CORP.  une of Corporation) , a corporation organized under the laws of the State of	me of Corporation), a corporation organized under the laws of the State of

### 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