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## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
	ECT: RCAA HOLDINGS (Name of Corporation)  UMENT NUMBER: 103000102265
	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
	e return all correspondence concerning this matter to the following:
	ANTONI KINON (Name of Person)
<del></del>	(Name of Firm/Company)
	(Address)
	BOYNTON BEACH, FI. 33463 (City/State and Zip Code)
For fi	urther information concerning this matter, please call:
RO	Name of Person) at (501) 439-3590 (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis P.O.	ing Address: Indiment Section Identify Section Street Address: Amendment Section Division of Corporations Box 6327 Box 6327 Box 6327 Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

OF MIR IS PHIR 12

i, Antoni Kina	, hereby resign as Treasurer
	(Title)
of R.C.A.A. Prop	erty Management, Inc.
03000 10 2765 (Document Number, if known)	, a corporation organized under the laws of the State of
_Florida	. •

Antoni Signature of Anguing 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