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Amendment Section Division of Corporations

TO:

SUBJECT: Emerald Coast H	ospitality Service, INC
D	(Name of Corporation)
DOCUMENT NUMBER: P	J4000012634
The enclosed Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Peter Boros	
(Name of F	Person)
Emerald Coast Hospitality Se	ervice, INC
(Name of Firm.	(Company)
5281 BAYWATER DRIVE	
(Addre	ss)
TAMPA FL 33615 US	
(City/State and	Zip Code)
For further information concerni	ng this matter, please call:
Peter Boros	at (727) 7489268 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 m	nade payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Andrey A. Kondinskiy	, hereby resign as CFO
**	(Title)
of Emerald Coast Hospitality Service, INC	C
(Name of Corpora	tion)
P04000012634 , a corpo	oration organized under the laws of the State of
Florida	
The second secon	
(Signature of	f 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