

P04000045536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

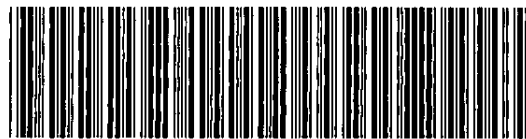
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400136553174

10/14/08--01018--018 **35.00

FILED

2008 OCT 14 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation
TR 10/21/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Central Florida Law Group, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P04000045536

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carmelina Marin

(Name of Person)

The Marin Law Firm, P.A.

(Name of Firm/Company)

501 N. Magnolia Ave., Suite B

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Carmelina Marin

(Name of Person)

at (407) 207-1902

(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
Post Office Box 6327
Tallahassee, FL 32314

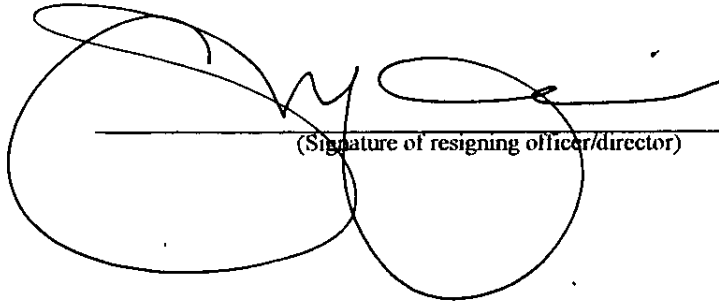
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2008 OCT 14 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Carmelina Marin, hereby resign as Director
(Title)

of Central Florida Law Group, P.A.
(Name of Corporation)

P04000045536, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(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