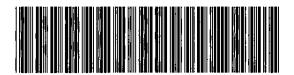
00143210

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	· ·
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
·	·	
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000113376980

12/26/07-01005-021 **35.00

COVER LETTER

DOCUMENT NUMBER: PO 4000 143210 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 6519 Senegal Palm Way Pollo Beach FL. 33572— (City/State and Zip Code) For further information concerning this matter, please call: Ruben Gonzale Z at (813) 973 - 8333 (Name of Person) (Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

12/06/61	
1, Susan Evereton, hereby resign as Vice Re	sident
of Certified Associated Appraisers (Name of Corporation)	of Florida, Inc
(Document Number, if known), a corporation organized under the laws of the S	State of
Florida	
Susan Breston) (Signature of resigning officer/director)	FILED 07 DEC 26 PM 4: 21 SCURETARY OF STATE TALLAHASSEE, FLORIDA

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