## P04000164888

(Re	equestor's Name)	,
····		
(A)	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
,		<b>,</b>
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nai	me)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificate:	s of Status
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Special Instructions to	Filing Officer:	
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SECRÉTARY OF STATE TALLAHASSEE, FLORIO 2010 DEC 20 AM 11: 5

off. Resign.

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DEC 2 1 2010

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUB-TECT. Breakthrough Pro	operty Management Services, Inc.	
(Name of Corporation)		
DOCUMENT NUMBER:P	04000164888	
The enclosed Officer/Director R	esignation for a Corporation and fee are submitted for filing	
Please return all correspondence	concerning this matter to the following:	
Trent A. Lacy Sr.		
(Name of	Person)	
	·	
(Name of Firm	i/Company)	
230 NW 18th Street	·	
, (Addre	ess)	
Pompano Beach, Florida 33	060	
(City/State and	Zip Code)	
For further information concern	ng this matter, please call:	
Trent A Lacy Sr.	at ( 954 ) 943-2944 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 r	nade 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

PALLAHASSEE, FLORIDA

Pamdrea G. Ivory	, hereby resign as Officer	ONIDA	
**	(Title)	<del></del>	
of_ Breakthrough Property Ma	The state of the s	<del></del> ;	
()	Name of Corporation)		
P04000164888	, 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