POUDDI28270

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Boodinont Hamber)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				

Office Use Only



000139043960

12/22/08--01023--016 **35.00

08 DEC 22 PM 4: 82

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

D) 2/31/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PARADISE POINT OF OSA, INC. (Name of Corporation)
DOCUMENT NUMBER: P06 000 128270
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DETER SILEX (Name of Person)
(Name of Person)
n/q
(Name of Firm/Company)
J206 S. Hopkins Ave, # 39 (Address)
Titusville, FL 32780 (City/State and Zip Code)
For further information concerning this matter, please call:
Roland Sileu at (321) 267 5060 (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

I, Peter Silen	, hereby resign as	SEC (Title)	
of Paradise Point o	LOSA, Inc	-,	_,
P06000128270 ,a con	poration organized under th	e laws of the State of	
FLORIBA.			
(Signature	e of resigning officer/director)	08 DEC 66	FILED STATE SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORAT

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314