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(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
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10/29/07--01035--012 **35.00

SECRETARY OF STATE

officer Resignation

3

10-30-07

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: New Wave Real Estate Properties Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>PO 10000 18631</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Quincy Smith (Name of Person)
New Wave Real Estate Properties Inc (Name of Firm/Company)
33 4th St W Suite 210 (Address)
St. Peters purg, FL 33701 (City/State and Zip Code)
For further information concerning this matter, please call:
Quincy Snith at (727) 244-7525 (Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Latricia Poole	, hereby resign as_	Vice	President (Title)	.
of New Wave Real Estate (Name of Corpor	Properties	Inc		,
<u>PO 7000 18637</u> , a corp (Document Number, if known)	poration organized und	der the law	s of the State of	
Florida.				
Jahran Kanature	of resigning officer/direct	or)	2001 OCT 29 PK 35 TAIL SECRETARY OF STAIL RIDER TAIL ARBSTEE. FLORIDE TAILLANDSSEE. FLOR	FILED

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