

P070000061826

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

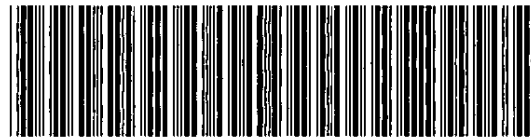
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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08 AUG 14 AM 11:54  
TALLAHASSEE, FLORIDA

T. Roberts AUG 19 2008

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 3900 PEMBROKE ROAD INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000061826

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

3900 PEMBROKE ROAD INC

(Name of Firm/Company)

3870 AMALFI DRIVE

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

BARBARA LAMBERT at ( 786 ) 586-3835  
(Name of Person) (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

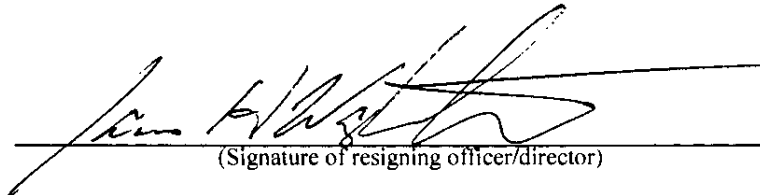
AUG 14 AM 11:54  
STATE DEPT. OF STATE  
TALLAHASSEE, FLORIDA

I, JAMES WASHINGTON, hereby resign as PRESIDENT  
(Title)

of 3900 PEMBROKE ROAD INC  
(Name of Corporation)

P07000061826, 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