

PO8 000076493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

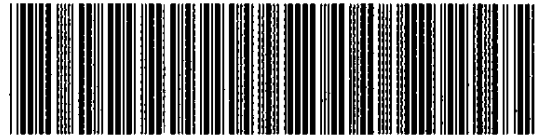
(Business Entity Name)

(Document Number)

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Mr/Elu Design

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 AUG 24 AM 10:26

Roberts AUG 25 2009

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 AUG 24 AM 10: 26

I, John A Ortolani, hereby resign as President
(Title)

of All Florida Comprehensive Property Management, Inc.
(Name of Corporation)

P08000076493, 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