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(Re	equestor's Name)	
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(Bı	usiness Entity Name)	
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE

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SEP 17 2009

COVER LETTER

SUBJECT: TROPICAL GARDENS MANAGEMENT GROUP CORP. (Name of Corporation)
DOCUMENT NUMBER: 109000009785
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
· MALIANS ACANDA (Name of Person)
TROPICAL GARDENS MANAGEMENT Glosf cold (Name of Firm/Company)
8922 NW 145 LANE (Address)
MIAMI LAKES, FV 33018 (City/State and Zip Code)
For further information concerning this matter, please call:
MALIANS ACANOA at (305) 824-0494 (Name of Person) at (305) 824-0494 (Area Code & Daytime Telephone Number)

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

TO: Amendment Section Division of Corporations

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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, MARLENE ACANDA , hereby resign as DIrec	tor/Presiden	t Secretan
of TROPICAL GARDENS MANAGEMENT BRO. (Name of Corporation)	of coep.	,
P0900009785, a corporation organized under the la	ws of the State of	
- FLORIDA	200 SE	en : :d
	2009 SEP L SECRETARY ALLAHASS	
(Signature of resigning officer/director)	Y OF S	D
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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