## P09000055703

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<del> </del>		

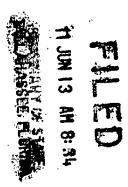
Office Use Only



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## **COVER LETTER**

TO:	Amendment Section	
	Division of Corporations	

SUBJECT: City Properties Group Income of Corporation)  DOCUMENT NUMBER: P09000-55703
DOCUMENT NUMBER: P 09 <b>Q</b> 000 - 55 7 03
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Doris Grisales
(Name of Person)
City Properties Group Inc. (Name of Mrm/Company)
175 5W 7th Stroot Ste 1506
(Address)
Miani FL 33130 (City/State and Zip Code)
(City/State and Zip Code)

For further information concerning this matter, please call:

Miguelangel Roman at (786) 397-0010 (Area Code & Daytime Telephone Number)

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

Street Address:
Amendment Section

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

(Title)

I, Vil mary Olaciregui, hereby resign as\_\_\_ City Proportios Group Inc.
(Name of Corporation)

0900055703, a corporation organized under the laws of the State of

(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