

PO 9000063689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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*W/Ed King*

FILED  
10 APR -5 AM 11:56  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

Roberts APR 07 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** South Florida Tax Appeal, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P 09000063689

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Robert Frame  
(Name of Person)

South Florida Tax Appeal, Inc  
(Name of Firm/Company)

680 NE 97<sup>th</sup> Street  
(Address)

Miami, FL 33138  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Frame at (305) 302 1784  
(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**  
10 APR -5 AM 11:56  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

I, Robert Frame, hereby resign as officer (director)  
(Title)

of South Florida Tax Appeal, Inc.  
(Name of Corporation)

P09000063689, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

Robert Frame  
(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