P1000008a617

(Requestor's Name)			
(Address)			
(Address)			
· ·			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

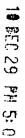




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12/29/10--01005--009 **35.00







COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	TECT: Floral Bluff Properties, Incorporated
	(Name of Corporation)
DOC	UMENT NUMBER: P10000082617
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Joe	Louis Joseph
	(Name of Person)
Flor	al Bluff Properties, Incorporated
	(Name of Firm/Company)
182	3 Landwood Street
	(Address)
Jack	sonville, Florida 32211
	(City/State and Zip Code)
For fi	orther information concerning this matter, please call:
Joe l	_ouis Josephat (904) 705-7638 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Clifto 2661	Mailing Address: dment Section on of Corporations n Building Executive Center Circle lassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, George Joseph	, hereby resign as(Title)
of Floral Bluff Properties, Incorporated (Name of Corp.)	
P10000082617 , a co	orporation organized under the laws of the State of
Florida	re o'Nesigning 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