## P14000096469

(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	TIAW	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	ocument Number)			
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## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: <u>FL Bodeson Real Zstate Services</u> In e (Name of Corporation)
DOCUMENT NUMBER: P 14000096469
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CARLOS M. ORTIZ (Name of Person)
El Boleson Real Estate IDC (Name of Firm/Company)
4481 LAKE WORTH RO
LAKE WORTH F1 33461 (City/State and Zip Code)
For further information concerning this matter, please call:
CARLOS H. ORITZ at (561) 662 12 86 (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
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, OSCAR SAN	SFR	, hereby resign	as Preside	ot
of FL Bodeson	Real	Estate	Solvices	Inc
(Name of Corporation)				
7140000 96469 (Document Number, if known)	, a cor	poration organized	under the laws of the S	tate of
Florida	·			

FILING FEE IS \$35.00

fure of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314