P94000051322

| (Requestor's Name) | | |
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| (Address) | | |
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| (i idailoso) | | |
| | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
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| (Duning and Falling) | | |
| (Business Entity Name) | | |
| | | |
| (Document Number) | | |
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| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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0/0 Resignation

MM 7/14/03

TRANSMITTAL LETTER

| Amendment Section Division of Corporations | | | - | |
|---|---|-----------------------------------|------------------|------------------------|
| SUBJECT: Associates Home Co | onstruction,Corp. II (Name of Corpor | ration) | | ** ••• • • • • • • • • |
| DOCUMENT NUMBER: P960 | 000051322 _ | | · | |
| The enclosed Officer/Director Resig | gnation for a Corporation | n and fee are submi | tted for filing. | |
| Please return all correspondence cor | ncerning this matter to th | ne following: | _ | |
| Ralph K. Wilson | | | | • |
| (Name of Person | on) | | ÷ | · |
| Associates Home Construction, | Corp. II | | | |
| (Name of Firm/Co | • | tion was | · . <u></u> | · · · · · · · · · |
| !47 Alhambra Circle, Suite 212 | | | | |
| (Address) | <u> </u> | | · | |
| Coral Gables, Fla. 33134 | | | | |
| (City/State and Zip | Code) | | | |
| For further information concerning t | this matter, please call: | | | |
| Ralph K. Wilson | 305 | . 266-6974 | | |
| (Name of Person) | at (at (Area Cod |) 266-6974 e & Daytime Telepho | one Number) | · . |
| Enclosed is a check for \$35.00 made | e payable to the Florida | Department of State | e. | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Amendment Section Division of Corporatio 409 E. Gaines Street Tallahassee, FL 32399 | • | | |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| Mary Alice Behrens | , hereby resign as Vice President | | |
|--|--|--|--|
| A1 | (Title) | | |
| of Associates Home Construction, C | Dorp. II | | |
| | Corporation) | | |
| P96000051322 (Document Number, if known) | a corporation organized under the laws of the State of | | |
| Florida | | | |
| | | | |
| | | | |
| nanjalu (Sigr | ie Delle Hature of resigning officer/director) | | |
| | FILEU 11 PM 2: 45 HASSEE, FLORIT | | |

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

FILING FEE IS \$35.00

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