P96000101571

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
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	ty/State/Zip/Phone	. #\
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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PILLU 08 FEB 15 PM 3: 35 SECRETARY OF STATE ALLAHASSEE, FLORIDA

Officer Risign Crin Murphy 2/22/08

COVER LETTER

TO:	: Amendment Section Division of Corporations	•
SUB	BJECT: Ocean Reef Pools, Inc.	
	(Name of Corporation)	
DOC	CUMENT NUMBER: P96000101571	
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted fo	r filing
Pleas	ase return all correspondence concerning this matter to the following:	
Geo	eorge Lees	
	(Name of Person)	
Oce	cean Reef Pools, Inc.	
	(Name of Firm/Company)	
354	40 John Anderson	
	(Address)	
Orn	mond Beach, FL 32174	
	(City/State and Zip Code)	
For fi	further information concerning this matter, please call:	
Geo	orge Lees at (386) 441-9156 (Name of Person) (Area Code & Daytime Telephone Nu	
	(Name of Person) (Area Code & Daytime Telephone Nu	mber)
Encl	losed is a check for \$35.00 made payable to the Florida Department of State.	
Amer Divis Clifto 2661	endment Section ision of Corporations ton Building 1 Executive Center Circle lahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Flynn Edmonson	, hereby resign as DPST		
		(Title)	
of Ocean Reef Pools, Inc.		,	
(Nan	ne of Corporation)	,	
P96000101571 (Document Number, if known)	, a corporation organized under the laws of	of the State of	
Florida	·		
<u> Alynn</u>	(Signature of resigning officer/director)	FILED 08 FEALS PM 3: 35 SECRETARY OF STAIL TALLAHASSEE, FLORID	

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