P97000104797

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAI	IL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer: Sent Cornes Hees on King of R. A.	es.	



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SECRETARY OF STATE

22/100

COVER LETTER

	nent Section of Corporations
SUBJECT: C	ASINO HOMES CORP
	(Name of Corporation)
DOCUMENT	NUMBER: P97000104797
The enclosed O	ficer/Director Resignation for a Corporation and fee are submitted for filing
Please return all	correspondence concerning this matter to the following:
MAURICIO M	JALIL
	(Name of Person)
	(Name of Firm/Company)
9721 SW 35	STREET
	(Address)
MIAMI, FL 33	165
	(City/State and Zip Code)
For further info	mation concerning this matter, please call:
MAURICIO M	JALIL at (305) 984-8693 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a cl	eck for \$35.00 made payable to the Florida Department of State.
Street Address Amendment Ser Division of Cor Clifton Building 2661 Executive Tallahassee, FL	ction Amendment Section corations Division of Corporations Post Office Box 6327 Center Circle Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

MAURICIO MIGUEL JALIL	, hereby resign as VICE PRESIDENT
·,	(Title)
of_CASINO HOMES,CORP	Corporation)
D07000104707	a corporation organized under the laws of the State of
FLORIDA	GRETARSSI
	AN 9: 46 EE, FLORIDA
, (Sig	gnature 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