

Requester's Name  
 Address  
 City/State/Zip Phone #

**P98000052352**

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **R000004950588--8**  
 =02/18/02--01092--004  
 \*\*\*\*\*122.50 \*\*\*\*\*35.00
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in     Pick up time     Certified Copy  
 Mail out     Will wait     Photocopy     Certificate of Status

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 02 FEB 22 AM 8:11  
**FILED**

*P98000052352*  
*02/18/02*  
*01092*  
*004*

Examiner's Initials

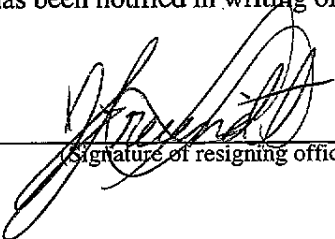
**OFFICER / DIRECTOR RESIGNATION**

I, JUDITH FREUNDT, hereby resign as OFFICER/DIRECTOR  
(Title)

of CISNE PROPERTIES, INC.  
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

  
\_\_\_\_\_  
(Signature of resigning officer/director)

**FILED**  
02 FEB 22 AM 8:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**