(Re	questor's Name)	
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COVER LETTER

Division of Corporations
SUBJECT: HALLANDALE LANG MANAGEMENT INC (Name of Corporation)
DOCUMENT NUMBER: <u>P9900003257</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JON MANSA (Name of Person)
HALLANDALE CANES MANAGEMENT INC D.BA. Holinay Chales (Name of Firm/Company)
223 EAST CONCORD ST &
ONLAMOU FLORIDA 3280 (City/State and Zip Code)
For further information concerning this matter, please call:
TON MARSA at (407) 259-5192 (Name of Person) (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ACAM MANSA , hereby resign as,	V. P. (Title)
of HALLANDALE LAXIES MANAGEMEN (Name of Corporation)	TINC.
, a corporation organized under (Document Number, if known)	the laws of the State of
DEC. 19, 2007	
Allen A Marson	OJ ALI
(Signature of resigning officer/director)	PIL P DEC 24 P CRETARY C LAHASSEE
FILING FEE IS \$35.00	PH 2: 49 OF STATE E. FLORIDA

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

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