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SEURETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resign Crin murphy 12/18/07

COVER LETTER

| TO: Amendment Section Division of Corporations |
|-----------------------------------------------------------------------------------------------|
| SUBJECT: LAW dSCHPE MANAGEMENT OF SOUTH FL. INC. (Name of Corporation) |
| DOCUMENT NUMBER: VO2 104 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| LCNNY MALUS KY (Name of Person) |
| LANd SCHOE MANNSEMENT OF SOUTH FL. INC (Name of Firm/Company) |
| 15097 73 ST, NORTH (Address) |
| LoxuhuTchee FL, 33470 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Lewny MALusky at (56/) 436-1597 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State. |

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

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, Lenoro MALUSKY, hereby resign as OFFicer / So | ECRETA le) | 4KY | |
|------------------------------------------------------------------|---------------------|----------|---------|
| of LANDSCHPE MUNAGEMENT OF SOUTH FLORIDA I (Name of Corporation) | -NC. | , | |
| | State of | | |
| FLORI dA | | | |
| | | | |
| Lenry Malesty 12/10/07 (Signature of resigning officer/director) | SECRETA TALLAHAS | 07 DEC 1 | <u></u> |
| FILING FEE IS \$35.00 | RY OF STA | 17 PH L: | LED |

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

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