G 33299

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
, ,					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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SECRETARY OF STATE
TALLAHASSEE, FI OBJE

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OAK RIOGE PROPERTIES INC. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: 4 33299
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ROBELT LAUTHER (Name of Person)
(Name of Person)
OAK RIDGE IROP INC. (Name of Firm/Company)
(Name of Firm/Company)
1339 CORAL REEF 5=X
But St. Lucie Re 34983 (City/State and Zip Code)
For further information concerning this matter, please call:
ROBERT LAUTHER at (56/) 723-5205 (Name of Person) at (56/) 723-5205 (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	CHMSTOJALL MO	HILLIN, hereby resign as VI	O OPELA THUS (Title)
of_	OAK RIDGE PR	une of Corporation)	
	(Document Number, if known)	, a corporation organized under the	ne laws of the State of
	FLOMBA		
		· 	
	. ·	(Signature of resigning officer/director)	20 TAL
,		FILING FEE IS \$35.00	FILED 107 JAN -5 PH 1: LARE TARY OF STALLAHASSEE, FLORE

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

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