

N 160000007147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

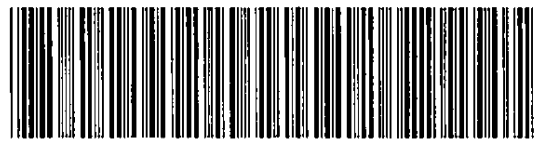
(Business Entity Name)

(Document Number)

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2017 JUN 22 PM : 24  
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C. GOLDEN  
JUN 27 2017

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Little Grove NO. 2 Condo. Assoc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N16000007147

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Valdes  
(Name of Person)

Little Grove NO. 2 Condo. Assoc.  
(Name of Firm/Company)

P.O. BOX 495606  
(Address)

Miami FL 33245  
(City/State and Zip Code)

For further information concerning this matter, please call:

Eduardo Rodriguez at (305) 992-4709  
(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  
P.O. Box 6327  
Tallahassee, FL 32314

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

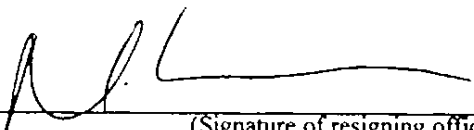
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2017 JUN 22 10:11 AM

I, Michael Valdes, hereby resign as D Treasurer FLORIDA  
(Title)

of LITTLE GROVE NO.2 CONDOMINIUM ASSOCIATION, INC.  
(Name of Corporation)

N16000007147, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(Signature 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