

(Requestor's Name) (Address)	60015738		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:	property of the second		
	<u>:</u>		
1	i		

Office Use Only



34326

--015 **175.00

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: HOMEDEVCO, INC
(Name of Corporation)
DOCUMENT NUMBER:F02000000424
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ANDREW STEINBERG
(Name of Person)
. HOMEDEVCO, INC
(Name of Firm/Company)
5350 WEST ATLANTIC AVENUE
(Address)
DELRAY BEACH, FL 33484
(City/State and Zip Code)
For further information concerning this matter, please call:
RICHARD A SWARTZ 31 (561) 638-3600
RICHARD A SWARTZ at (561) 638-3600 (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

STEPHEN F PACOCHA	, hereby resign as_	Director & Secretary		
*,	, notoby rosign us_	(Title)		
of_ HOMEDEVCO, INC			,	
(Name	of Corporation)			
F0200000424 (Document Number, if known)	, a corporation organized un	der the laws of the Sta	ر وو	
DELAWARE	·	AHASS	UN 23	T
		ee, fl	3	T
		TATE	! 19	
	Santific of resigning officer/direc	tor		

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