

No 3000006785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

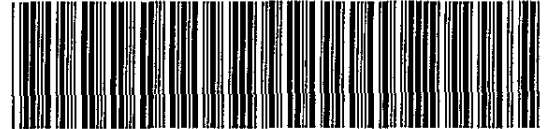
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GAP Community Resources, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N03000006785

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

Please return all correspondence concerning this matter to the following:

Josie Lightfoot

(Name of Person)

(Name of Firm/Company)

5055 Preston Rd., Suite 200

(Address)

Pasadena, TX 77505

(City/State and Zip Code)

For further information concerning this matter, please call:

Josie Lightfoot

(Name of Person)

at ( 281 ) 998-9144

(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

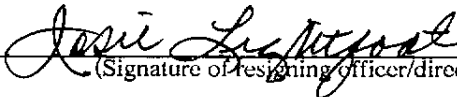
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06 NOV 29 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Josie Lightfoot, hereby resign as Vice President / Secretary  
(Title)

of GAP Community Resources, Inc.  
(Name of Corporation)

N03000006785, 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