

N04 00000 4460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Resign

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Community First CDC Inc
SUBJECT: _____
(Name of Corporation)

DOCUMENT NUMBER: N04000004460

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

Please return all correspondence concerning this matter to the following:

Anna Woods

(Name of Person)

Community First CDC Inc.

(Name of Firm/Company)

754 Summer Oaks Court

(Address)

Oviedo, Florida 32765

(City/State and Zip Code)

For further information concerning this matter, please call:

Darren Woods 407 383-8531
_____ at (_____) _____
(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

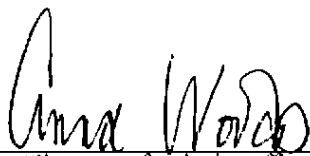
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Anna Woods Director
I, _____, hereby resign as _____
(Title)

Community First CDC, Inc.
of _____
(Name of Corporation)

N04000004460
_____, a corporation organized under the laws of the State of
(Document Number, if known)
Florida



(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FL

FILING FEE IS \$35.00

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