N06000005749

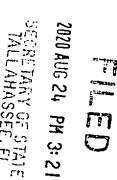
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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Jan 10/07/20

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

JeanLea Townhome Owners Association, Inc SUBJECT:		
(Name of Corporation)		
DOCUMENT NUMBER: N06000005749		
The enclosed Officer/Director Resignation for a Corporation	on and fee are submitted for filing.	
Please return all correspondence concerning this matter to t	the following:	
Barbara M. Knowles		
(Name of Person)	_	
(Name of Firm/Company)	_	
253 S. Bayshore Dr		
(Address)	_	
Valparaiso, Florida 32580		
(City/State and Zip Code)	_	
For further information concerning this matter, please call:		
Lynwood e. Knowles 850	974-3545	
(Name of Person) (Area Coo	de & 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Barbara M. Knowles	Sccretary Treasurer (DST), hereby resign as (Title)
.,	(Title)
KeanLea Townhome Owners Ass	ociation, Inc
O1	(Name of Corporation)
N06000005749	a corporation organized under the laws of the State of
(Document Number, if known	<u>n)</u>
Florida	
Tymo	(Signature of resigning officer/director) (Signature of resigning officer/director) Lecase of

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

