10090001659

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
,						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
·						
·						

Office Use Only



300163692223

12/18/09--01022--010 **35.00

09 DEC 18 PH 3: 54 SECRETARY OF STATE FALL AHASSEE, FLORID

FILED



COVER LETTER

TO: Amendment Section Division of Corporations

3 A

SUBJECT: SAMD LAKE HILLS LOMEOWKERS ASSOCIATION Section 3

DOCUMENT NUMBER: NO900011659

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

Please return all correspondence concerning this matter to the following:

TEFFREY C. BUSCH
(Name of Person)

SAND: LAKE HILLS HOA SECTION 5

8241 CARAWAY DR

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (407) 352-1532 (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

I,	JOHNHE	WEEK	, hereby resign as	(Title)		
of	SAND LAKE	(Name of Corp	HOMEOWHERS	ASSOCIATION	Spering.	
<u> </u>	Nogorous Sq., a corporation organized under the laws of the State of (Document Number, if known)					
	FLOCIDA	·				

(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

09 DEC 18 PH 3: 54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314