

N110000003683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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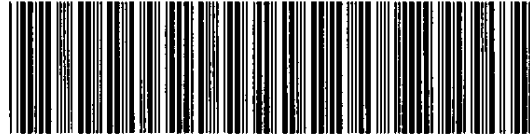
(Business Entity Name)

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15 AUG 12 AM 11:26

AUG 17 2015

Y CANNON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAPTIVA HOLIDAY VILLAGE, INC
(Name of Corporation)

DOCUMENT NUMBER: N 1100000 3683

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

Please return all correspondence concerning this matter to the following:

ELAINE SMITH
(Name of Person)

AMERICAN REALTY
(Name of Firm/Company)

PO BOX 1133 11526 ANDY ROSSE LN
(Address)

CAPTIVA FL 33924
(City/State and Zip Code)

For further information concerning this matter, please call:

ELAINE SMITH at (239) 395 2490
(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**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 AUG 12 AM 11:26

I, ELAINE SMITH, hereby resign as DIRECTOR
(Title)

of CAPTIVA HOLIDAY VILLAGE, INC.,
(Name of Corporation)

N 1100000 3683, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.

Elaine Smith
(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