

N16 0000003636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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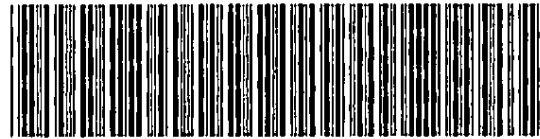
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Resignation of Officer  
\_\_\_\_\_  
(Name of Corporation)

DOCUMENT NUMBER: N16000003636  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Susan M Gotwals, Treasurer  
\_\_\_\_\_  
(Name of Person)

Brevard Backyard Beekeepers Inc.  
\_\_\_\_\_  
(Name of Firm/Company)

3695 Lake Dr.  
\_\_\_\_\_  
(Address)

Cocoa, FL 32926  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Susan M Gotwals \_\_\_\_\_ at (\_\_\_\_\_) 321 652-1737  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Clinton L. Best, hereby resign as President  
(Title)  
of Brevard Backyard Beekeepers Inc  
(Name of Corporation)  
N16000003636, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Clinton L. Best 10/1/20  
(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

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