## N21000007765

(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



900374235319

10/04/21--01010--015 \*\*35.08



A. Butter 10112121

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
Brevard Bombers Travel-Baseball, 1	
	(Name of Corporation)
DOCUMENT NUMBER: N21000007765	
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Roy Amos	
(Name of Person)	<del></del>
(Name of Firm/Company)	
984 Shaw Circle	
(Address)	<del></del>
Melbourne, FL 32940	
(City/State and Zip Code)	
For further information concerning this ma	ntter, please call:
Roy Amos	at (321 480-5806 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payal	ole to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## 

2021 OCT -4 PM 12: 39

SEGNALL 1 OF STATE TALL 1 1888, FL

I, Christine Melloh , hereby resign as (Title)

Brevard Bombers Travel-Baseball, Inc.

of (Name of Corporation)

N21000007765 , a corporation organized under the laws of the State of (Document Number, if known)

Florida

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