N2948/

(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



700260044687

05/13/14--01005--003 **70.00

14 MAY 13 PH 12: 02

MAY 23 2014 EXAMMER

, TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hidden Oaks Association, Inc. (Name of Corporation)
DOCUMENT NUMBER: N29481
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 Faulkner - O'New (Name of Person)
(Name of Firm/Company)
P.O. Box 1056 (Address)
Starke 1 Ft 32091 (City/State and Zip Code)
For further information concerning this matter, please call:
Susan Faulkner-O'New at (352) 745-1212 (Name of Person) (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
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E044 (05/13)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



1, Susan Faulkny O'Heal, hereby resign as Dice ctur
of Hidden Oaks Association, Inc (Name of Corporation)
12948/, a corporation organized under the laws of the State of (Document Number, if known)
Floridg
(Signature of resigning officer/director)
July and the state of the state

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