N37693

(Re	equestor's Name)	<u> </u>
(Ad	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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TRANSMITTAL LETTER

	Amendment Section Division of Corporations	<i>τ</i> ,	
SUBJE	CCT: Homeowners of The Sanctuary In		
		(Name of Corpo	ration)
DOCU	MENT NUMBER: N3 7693		
The end	closed Officer/Director Resignati	on for a Corporatio	n and fee are submitted for filing.
Please i	return all correspondence concert	ning this matter to t	he following:
Morris K	Teith Cox		
	(Name of Person)		-
	(Name of Firm/Compar	ıy)	-
2530 Jea	ın St.		
	(Address)		-
Titusville	e, Florida 32780		
	(City/State and Zip Coc	le)	-
For furt	ther information concerning this i	matter, please call:	
Morris K	Ceith Cox	321	302 2369) e & Daytime Telephone Number)
	(Name of Person)	(Area Coc	e & Daytime Telephone Number)
Enclose	ed is a check for \$35.00 made pay	yable to the Florida	Department of State.
	Mailing Address:	Street A	
	Amendment Section		lment Section
Division of Corporations Divisi		on of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Morris Keith Cox L	Treasure , hereby resign as	
		(Title)
Homeowners of The Sanctuary		
	(Name of Corporation)	-
N37693 (Document Number, if known	, a corporation organized under the	laws of the State of
Florida		
	(Signature of resigning officer/director)	
		ై: ట

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

FILING FEE IS \$35.00

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