N96000000529

(Re	equestor's Name)	<u> </u>	
(Ad	Idress)	<u> </u>	
. (Ad	ldress)		
(Cil	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nai	me)	
(Do	ocument Number))	
Certified Copies	_ Certificate:	s of Status	
Special Instructions to Filing Officer:			
§			

Office Use Only



000213163850

10/11/11--01014--011 **35.00

Off. Pres.
Thrailn 10-1/-11

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Brevard Jewish Community School, Inc.
(Name of Corporation)
DOCUMENT NUMBER: N96000000528
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
Matthew J. Monaghan, Esq.
(Name of Person)
HMTLAW
(Name of Firm/Company)
96 Willard Street, Ste. 302
(Address)
Cocoa, FL 32922
(City/State and Zip Code)
For further information concerning this matter, please call:
Matthew J. Monaghan, Esq. at (321) 639-1320
(Name of Person) at (321) 639-1320 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ZOII OCT II PH 2: 45

TALLAHASSEE, FILORIDI

I. Brian Steinberger	, hereby resign as	Director/Secretary
,	,oj 100.gn do	(Title)
of Brevard Jewish Commu	nity School, Inc.	
-	(Name of Corporation)	*
N9600000528 (Document Number, if known)	, a corporation organized under t	the laws of the State of
Florida	·	
	m	··
	(Stgnature 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

and the entered to the entered to the out-