00000005263

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		
	\$35,00	

Office Use Only



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TRANSMITTAL LETTER

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TO: Amendment Section Division of Corporations

Thornewood Community	Developers, Ir	nc
SUBJECT:	(Name of Co	ornoration)
DOCUMENT NUMBER: P00000003	,	
The enclosed Officer/Director Resignation	ion for a Corpora	ration and fee are submitted for filing.
Please return all correspondence concer	ning this matter	to the following:
Robert M. Kush		
(Name of Person)		
(Name of Firm/Compa	ıny)	
837 Oak Park Drive		
(Address)	, , -	
Melbourne, Florida 32940		
(City/State and Zip Co	ode)	
For further information concerning this	matter, please ca	all:
Robert M. Kush	321	432-4207
(Name of Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made pa	yable to the Flor	rida Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Robert M. Kush	DP
l,	, hereby resign as(Title)
	(Title)
Thornewood Comm	ity Developers, Inc.
· · ·	(Name of Corporation)
P0000005263	, a corporation organized under the laws of the State of
(Document Number,	lown)
Florida	
	(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