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SECRETARY OF STATE
OF VISION OF COMPONATION

201 IN 21 AM II: 2



TRANSMITTAL LETTER



TO: Amendment Section Division of Corporations

Island Community [
SUBJECT:	(Name of Co	rporation)
DOCUMENT NUMBER: P0200	00072608	
The enclosed Officer/Director Res	signation for a Corpora	ation and fee are submitted for filing
Please return all correspondence c	oncerning this matter	to the following:
Robert M. Kush		
(Name of Pe	erson)	
(Name of Firm/C	Company)	
837 Oak Park Drive		
(Address	;)	
Melbourne, Florida 32940		
(City/State and 7	Lip Code)	
For further information concerning	g this matter, please ca	ill:
Robert M. Kush	321	432-4207
(Name of Person)	(Area) Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade payable to the Flor	ida Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314	Street Address: Amendment Section Division of Corpore 2661 Executive Ce Tallahassee, FL 32	ations nter Circle

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



DP	
hereby resign as	
(Title)	
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Corporation)	
,	
a corporation organized under the laws of the State of	
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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