(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:
·
j

Office Use Only



800236022148

06/19/12--01016--007 **35.00



COVER LETTER

TO: Amendment Section Division of Corpora			
SUBJECT: Compass G	roup DEV., INC		
		(Name of Corpor	ration)
DOCUMENT NUMBER	:P020001273	310	
The enclosed Officer/Direct	ctor Resignation f	or a Corporation	n and fee are submitted for filing.
Please return all correspon	_	this matter to th	ne following:
LISA FLICK	A PARTICLE CONTRACTOR		
(Nar	ne of Person)	<u> </u>	•
COMPASS GROUP, D	EV. INC.		
(Name o	f Firm/Company)		•
961687 GATEWAY BL	VD. #201m		
(Address)		•
AMELIA ISLAND, FLO	RIDA 3204		
(City/Sta	nte and Zip Code)		•
For further information con	ncerning this matt	ter, please call:	
LISA FLICK		at (904	261-0059 X20 e & Daytime Telephone Number)
(Name of Po	erson)	(Area Cod	e & Daytime Telephone Number)
Enclosed is a check for \$3	5.00 made payabl	e to the Florida	Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	Amend	ng Address: dment Section on of Corporatio Office Box 6327 hassee, FL 32314	

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, LISA G. FLICK	, hereby resign as	SECRETARY/TREASURER	
· · · · · · · · · · · · · · · · · · ·		(Title)	
of COMPASS GROUP DEV., IN	C.		
	of Corporation)		
P02000127310	, a corporation organized under the laws of the State of		
(Document Number, if known)			
FLORIDA		201. SEC TALL	
		2012 JUN SECRETA ALLAHAS	
		SSE SSE	
. 0		£υc.	
7.	u lo y	PH 2:	
() usa	Signature of resigning officer/direction		

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