

P030000014069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

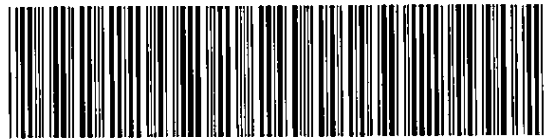
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2018 JUN 11 AM 11:00

JUN 13 2018

CLERK

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2018 JUN 11 AM 11:00

TO: Amendment Section
Division of Corporations

SUBJECT: Strokes Community Developers, Inc

(Name of Corporation)

DOCUMENT NUMBER: P03000014069

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert M. Kush

(Name of Person)

(Name of Firm/Company)

837 Oak Park Drive

(Address)

Melbourne, Florida 32940

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert M. Kush 321 432-4207
_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida 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**

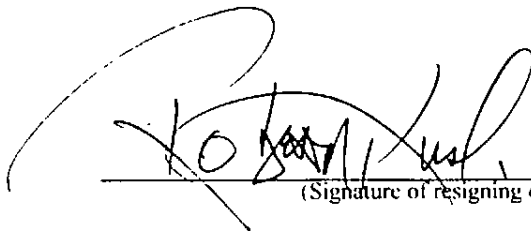
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

2010 JUN 11 AM 11:00

I, Robert M. Kush, hereby resign as D
(Title)

Strokes Community Developers, Inc
of _____
(Name of Corporation)

P03000014069, a corporation organized under the laws of the State of
(Document Number, if known)
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