

PO3000104940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

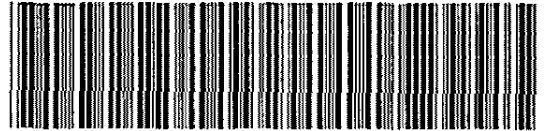
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAY 27 AM 11:52

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAPE CANVAS & CUSHION INC.
(Name of Corporation)

DOCUMENT NUMBER: P03000104940

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

Please return all correspondence concerning this matter to the following:

CORINNE A. DENBESTEN
(Name of Person)

CAPE CANVAS & CUSHION INC.
(Name of Firm/Company)

1449 S.E. 14th TERRACE
(Address)

CAPE CORAL FL 33990
(City/State and Zip Code)

For further information concerning this matter, please call:

CORINNE A. DENBESTEN 239 458-4513
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Christine A. Brown, hereby resign as DIRECTOR
(Title)

of CAPE CANVAS & CUSHION, INC.
(Name of Corporation)

PD3000104940, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

Christine A. Brown
(Signature of resigning officer/director)

FILED
04 MAY 27 AM 11:52
CLERK OF STATE
TALLAHASSEE, FLORIDA

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