

PC4000 056 746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

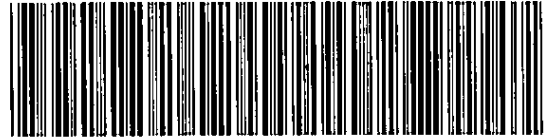
(Business Entity Name)

(Document Number)

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SEP 25 PM 3:18  
C. McNair

OCT 15 2019  
C. McNair

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** **KIAWAH PROPERTIES CORP.**

(Name of Corporation)

**DOCUMENT NUMBER:** **P04000056746**

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

Please return all correspondence concerning this matter to the following:

**PETER J. PORT**

(Name of Person)

**KIAWAH PROPERTIES CORP.**

(Name of Firm/Company)

**3579 NW CLUBSIDE CIRCLE**

(Address)

**BOCA RATON, FL 33496**

(City/State and Zip Code)

For further information concerning this matter, please call:

**PETER PORT**

(Name of Person)

at **( 516 ) 343-8110**

(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**

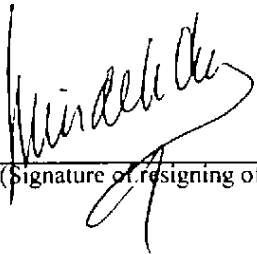
SEP 25 PM 3:18  
AT TALLAHASSEE

I, LUIS D. DE LA CRUZ, hereby resign as P/Regt. Agent  
(Title)

of KIAWAH PROPERTIES CORP.  
(Name of Corporation)

P04000056746, 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