PO/00/10/38

(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:	

Office Use Only



200299416382

06/05/17--01028--022 **490.00

JUN 0 7 2017 S. YOUNG TALLANASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CADES COVE COMMUNITY DEVELOPERS, INC.
(Name of Corporation)
DOCUMENT NUMBER: P04000110138
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
FABIOLA SANTIAGO
(Name of Person)
PRINCE CPA GROUP
(Name of Firm/Company)
9161 NARCOOSSEE RD. STE 202
(Address)
ORLANDO, FL 32827
(City/State and Zip Code)
For further information concerning this matter, please call:
FABIOLA SANTIAGO (Name of Person) at (407 823-8230 (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

I, SCOTT BUESCH	FR hereby resign as D
	OMMUNITY DEVELOPERS, INC.
P04000110138 (Document Number, if known)	me of Corporation)
FLORIDA	·
	•

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

17 JUN - 5 PM 3: 59