P04000138094

	(Requestor's Name)		
	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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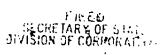
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TRANSMITTAL LETTER *



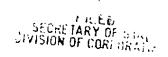
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2018 JUN I I AM II: CO

TO: Amendment Section Division of Corporations

	nity Developers, Inc
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER:	00138094
The enclosed Officer/Director Re	signation for a Corporation and fee are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
Robert M. Kush	
(Name of Po	erson)
(Name of Firm/	Company)
837 Oak Park Drive	
(Addres	<u>s)</u>
Melbourne, Florida 32940	
(City/State and	Zip Code)
For further information concerning	g this matter, please call:
Robert M. Kush	321 432-4207
(Name of Person)	at () (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 m.	ade 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



2018 JUN 1 1 AM 11: 0#

Robert M. Kush	D	
I,	, hereby resign as	
	(Title)	
Cascades Community Developers, Inc		
of		
(Name of Corpora	tion)	
P04000138094		
, a corp	oration organized under the laws of the State of	
(Document Number, if known)	· ·	
Florida		
_		
) /	
	/	
/ No hoory	\mathcal{W} .	
(Signature o	f 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