

PO5000035046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

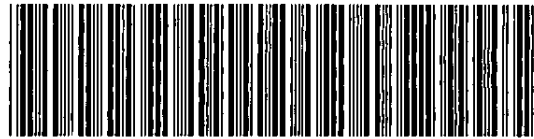
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600136553236

10/14/08--01018--017 **35.00

FILED

2008 OCT 14 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation

TB

10/16/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: B M DEVELOPMENT PLUS, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000035046

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

Please return all correspondence concerning this matter to the following:

LAURA P. MIDULLA

(Name of Person)

B M DEVELOPMENT PLUS, INC.

(Name of Firm/Company)

4767 CHICAGO ST.

(Address)

COCOA, FL 32927

(City/State and Zip Code)

For further information concerning this matter, please call:

LAURA P. MIDULLA

(Name of Person)

at (321) 302-8949

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

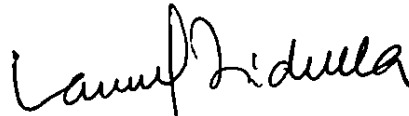
FILED
2008 OCT 14 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, LAURA P. MIDULLA, hereby resign as VICE PRESIDENT
(Title)

of B M DEVELOPMENT PLUS, INC.
(Name of Corporation)

P050000350346, 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