P96000006059

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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Resign.

9/4/13



DC

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TRANS FLORIDA DEVELOPMENT CORPORATION (Name of Corporation)
DOCUMENT NUMBER: P 96 000006059
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DENNIS D. MADDOX (Name of Person)
TRANS FLORIDA DEVELOPMENT CORP. (Name of Firm/Company)
13960 SW 144 AVENUE ROAD (Address)
MIAMI, FLORIDA 33186 (City/State and Zip Code)
For further information concerning this matter, please call:
DENNIS MADDOX at (305) 970-2305 (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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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