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R. WHITE

## TRANSMITTAL LETTER

Division of Corporations Leonine Development Services, Inc. (Name of Corporation) **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bryan C. Mayland (Name of Person) Leonine Development Services, Inc. (Name of Firm/Company) 14499 N. Dale Mabry Hwy #165 (Address) Tampa, FL 33618 (City/State and Zip Code) For further information concerning this matter, please call: Bryan C. Mayland Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Linda Murray	, hereby resign as Director
	(Title)
Leonine Developm	ent Services, Inc.
	e of Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	<del></del> '
9	inta Murray
(	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

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