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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Chi Psi Omega PLUS Inc
(Name of Corporation)

DOCUMENT NUMBER: N06000003766

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

Please return all correspondence concerning this matter to the following:

Trivel Cooper McKire
(Name of Person)

Chi Psi Omega PLUS Inc
(Name of Firm/Company)

222 NW 10th Avenue
(Address)

Pompano Beach, Florida 33060
(City/State and Zip Code)

For further information concerning this matter, please call:

Trivel Cooper McKire at (954) 234-1563
(Name of Person) (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**

I, Trivel Cooper McKire, hereby resign as Board Member
(Title)

of Chi Psi Omega PLUS Inc.
(Name of Corporation)

N06000003766, 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

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