

N11000000322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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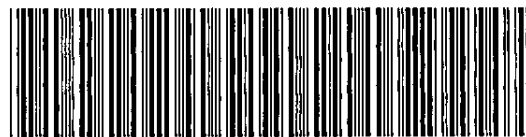
(Business Entity Name)

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TO: Amendment Section
Division of Corporations

SUBJECT: WAT NITAPASANAKHUN BUDDHIST Temple of FLORIDA INC.
(Name of Corporation)

DOCUMENT NUMBER: N11000000322

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

Please return all correspondence concerning this matter to the following:

PHRAKU S. SORRAWIT
(Name of Person)

WAT NITAPASANAKHUN BUDDHIST Temple of FLORIDA INC.
(Name of Firm/Company)

13301 US. HIGHWAY 441 S.E.
(Address)

OKEECHOBEE FL 34974
(City/State and Zip Code)

For further information concerning this matter, please call:

PHRAKU S. SORRAWIT at (772) 766-3498
(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, AMPAI SONG BANDIT, hereby resign as ATD
(Title)

of WAT NITAD SASANA KHUN BUDDHIST TEMPLE OF FLORIDA INC.
(Name of Corporation)

N11000000322, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
12 JUN 18 PM 3:06
TALLAHASSEE, FLORIDA

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