

N110000006318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

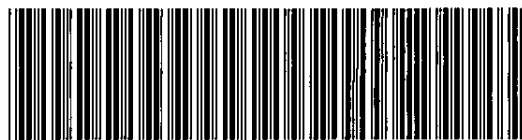
(Business Entity Name)

(Document Number)

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900211042799

*Resignation
Of Officer*

900211042799
08/16/11 -- 01005 -- 006 **35.00

FILED
2011 AUG 16 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*1002
8/19/11*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MICAH 6:8 MINISTRY, INC.
(Name of Corporation)

DOCUMENT NUMBER: W11000030884

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

DAN J. SHIELDS SR.
(Name of Person)

MICAH 6:8 MINISTRY, INC.
(Name of Firm/Company)

3294 SPRUCE CREEK GLEN
(Address)

PORT ORANGE, FL 32128
(City/State and Zip Code)

For further information concerning this matter, please call:

DAN J. SHIELDS SR. at (386) 267-5557
(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

FILED

OFFICER / DIRECTOR RESIGNATION

FOR A CORPORATION 2011 AUG 16 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MARY KATHRYN SHIELDS, hereby resign as DIRECTOR / TREASURER
(Title)

of MICAH 6:8 MINISTRY, INC.
(Name of Corporation)

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

FLORIDA.

Mary Kathryn Shields
(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