(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL
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D/D Resign SEP 1 1 2014

T. CARTER

TRANSMITTAL LETTER

SUBJECT: Resignation of board member
(Name of Corporation)

DOCUMENT NUMBER: N13000003619

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

Gary A. Smith
(Name of Person)

City of Life Orlando, Inc.
(Name of Firm/Company)

2874 E. Irlo Bronson Memorial Highway
(Address)

Kissimmee, FL 34744
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary A. Smith

(Name of Person)

(Name of Person)

(Name of Person)

(Area Code & Davigne 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

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

FILED OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE FOR A CORPORATION TALLAHASSEE, FLORIDA

14 SEP -2 PM 2: 57

, James Nelson Henry	y, Jr., hereby resign as director and secretary
***	(Title)
of City of Life Orlando	
N13000003619	Corporation) a corporation organized under the laws of the State of
Florida	
(Sig	nature 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