

N17 00000 1350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

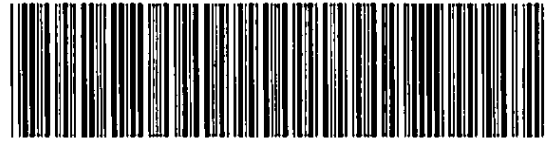
(Business Entity Name)

(Document Number)

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2019 APR 15 PM 5:37

STATE OF MISSISSIPPI

R. WHITE

APR 15 2019

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Jacksonville Black Chamber Of Commerce Foundation, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** N17000001350

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

Kevin M. Smith  
(Name of Person)

The Associate(s) Consortium , LLC  
(Name of Firm/Company)

P.O. Box 43478  
(Address)

Jacksonville, Fl. 32203  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin M Smith at ( 904 ) 887-0858  
(Name of Person) (Area Code & Daytime 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

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

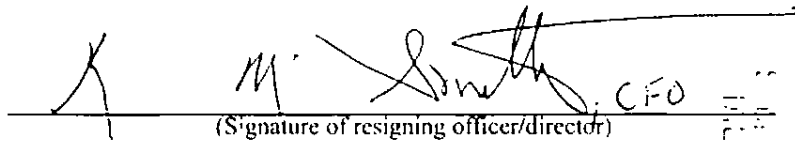
RECEIVED  
APR - 8 PM 12:00  
TALLAHASSEE, FL  
SECRETARY

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Kevin M' Smith, hereby resign as CFO  
(Title)

of Jacksonville Black Chamber Of Commerce Foundation, Inc.  
(Name of Corporation)

#N17000001350, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(Signature of resigning officer/director) CFO

2019 APR 15 PM 5:37  
FILED  
TALLAHASSEE, FLORIDA

FILED

**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