

N24735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

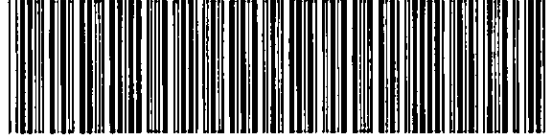
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hope and Help Center of Central Florida
(Name of Corporation)

DOCUMENT NUMBER: N24735

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

Please return all correspondence concerning this matter to the following:

Lisa Barr

(Name of Person)

Hope and Help Center of Central Florida

(Name of Firm/Company)

707 Mendham Blvd., Suite 104

(Address)

Orlando, FL 32825-3245

(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Barr

(Name of Person)

at (407) 645-2577

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Matthew Roberts, hereby resign as Secretary
(Title)

of Hope and Help Center of Central Florida
(Name of Corporation)

N24735, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
18 DEC -3 AM 8:13
SECRETARY OF STATE
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