NA4735

(Re	equestor's Name)	
(Ad	ldress)	<u>. </u>
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



900321540409

12/10/18--01007--008 **35.00

2018 DEC TO AM 10: 53
SECRETARY OF STATE
TALL ANASSES. FI

יווש חבר וט אאוטי

C. GOLDEN

DEC 1 1 2018

TRANSMITTAL LETTER

Division of Corporations Hope and Help Center (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: Karen Jaeger (Name of Person) (Name of Firm/Company) 16767 Keene Road (Address) Umatilla, Florida 32784 (City/State and Zip Code) For further information concerning this matter, please call: Karen Jaeger (Area Code & Daytime Telephone Number) (Name of Person)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations

TO:

Amendment Section

P.O. Box 6327 Tallahassee, FL 32314 Street Address:

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



November 26, 2018

KAREN JAEGER 16767 KEENE ROAD UMATILLA, FL 32784

SUBJECT: HOPE AND HELP CENTER OF CENTRAL FLORIDA, INC.

Ref. Number: N24735

We have received your document for HOPE AND HELP CENTER OF CENTRAL FLORIDA, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 118A00024046

Claretha Golden Regulatory Specialist II

www.sunbiz.org

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

of Hope and Hope (Name of Corporation	hereby resign as P	- Box (Title) Her of Flaws of the State of	Cen- lorid
Haun (Signature of ros	signing officer director)	TALLAHAS	2018 DEC 10

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314