

N38791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

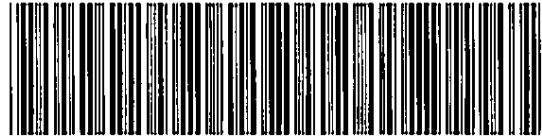
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
20 MAY 21 AM 11:51

MAY 23 2018
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TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 MAY 21 AM 11:51

TO: Amendment Section
Division of Corporations

SUBJECT: DisAbility Advocacy and Access Network, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N38791

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

Please return all correspondence concerning this matter to the following:

Patricia L Kennedy
(Name of Person)

DisAbility Advocacy and Access Network, Inc
(Name of Firm/Company)

9205 NW 80th Street
(Address)

Tamarac, FL 33321-1404
(City/State and Zip Code)

For further information concerning this matter, please call:

Pat Kennedy at (954) 724-0695
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

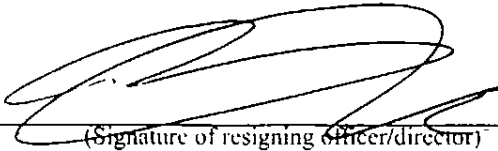
20 MAY 21 AM 11:51

I, Barbara Haley, hereby resign as Asst. Treasurer
(Title)

of DisAbility Advocacy and Access Network, Inc.
(Name of Corporation)

N38791, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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