NO4000000697

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800109690308

09/24/07--01054--006 **35.00

2007 SEP 24 AM 9: 32

Cs 9/28/07 Oples

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Forgotten Soldiers (Outreach, Inc. (Name of Co	rioration)
DOCUMENT NUMBER: N04	000000697	,
The enclosed Officer/Director Resignation	gnation for a Corpora	tion and fee are submitted for filing.
Please return all correspondence co	ncerning this matter t	oathe following:
Flaine Schnartz (Name of Pers	on)	· ·
(Name of Firm/Co	mpany)	- :
9553 Shadubrack (Address)	Or. #102	1
Boynton Beach F (City/State and Zig	-L 33437	<u>†</u>
For further information concerning	this matter, please cal	H: \$
(Name of Person)	at (at (Area C	i) Code: & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e payable to the Florid	da Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301	Mailing Address: Amendment Section Division of Corpora Post Office Box 632 Tallahassee, FL 323	tions 7 }

SECRETARY OF STATE DIVISION OF CORPORATIONS

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Elaine Schwartz	, hereby resign as_	Director	
is the second of	, iloros) rosigir so	(Title)	
of Forgotten Soldiers Outreach, I	nc.		
(Name	of Corporation)		·
N0400000697 (Document Number, if known)	_, a corporation organized un	der the laws of the State of	- /
Florida	· Com-1262-wage		
	ā, de S		
- Clair	Schmin		
خله الله الله الله الله الله الله الله ا	ignature of resigning office direct	tor)	

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