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	I NOT THE RESERVE TO	· ·
(R	equestor's Name)	
<u> </u>		
(A	ddress)	
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PICK-UP	WAIT	MAIL
/R	usiness Entity Name	9)
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Amendment Section Division of Corporations		,
SUB	JECT: Dewey Rowe Minist	ries, Inc.	
		(Name of Corpor	ration)
DOC	CUMENT NUMBER: NOO	000003658	
The c	enclosed Officer/Director Resig	gnation for a Corporation	n and fee are submitted for filing
Pleas	e return all correspondence co	ncerning this matter to the	ne following:
Dev	vey Rowe		
	(Name of Pers	son)	-
Dev	vey Rowe Ministries, Inc.		
	(Name of Firm/Co	ompany)	-
P.O	. Box 420307		
	(Address)		-
Kiss	simmee, Florida 34742		
*****	(City/State and Zi	p Code)	-
For f	urther information concerning	this matter, please call:	
Dew	ey Rowe	at (407	944-0046 e & Daytime Telephone Number)
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 mad	e payable to the Forida	Department of State.
Amer Divis Clifte 2661	ndment Section ion of Corporations on Building Executive Center Circle hassec, FL 32301	Mailing Address: Amendment Section Division of Corporatio Post Office Box 6327 Tallahassee, FL 32314	

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Diane Callihan	hereby resign as Director
	(Title)
of Dewey Rowe Ministries Inc.	
(Nai	e of Corporation)
N0000003658 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	(Signature of resigning officer/director)
	To A To See See C

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