

N000000006991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

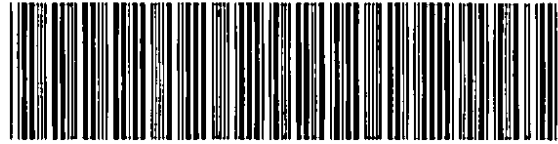
(Business Entity Name)

(Document Number)

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2019 JAN 28 PM 1:56

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FEB 01 2019  
T. L. L. L. L.

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: **HORSESISTERS & ASSOCIATES**  
(Name of Corporation)

DOCUMENT NUMBER: **N00000006991**

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

**Keith Wohr**

(Name of Person)

**N/A**

(Name of Firm/Company)

**3944 Mt. Vernon Ave.**

(Address)

**Titusville, Fl. 32780**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Keith Wohr**

(Name of Person)

at **321** **225-1034**

(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

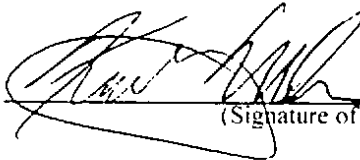
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Keith Wohn, hereby resign as Trustee  
(Title)

of Horsesisters & Associates  
(Name of Corporation)

N00000006991, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director) 25 JAN 2019  
KEITH WOHR

**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

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