N0200003874

(Requestor's Name)	
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afficer Resignation TBROWN SEP 222004

TRANSMITTAL LETTER

SUBJECT:		c 15,000		ation)		
DOCUMENT NU	MBER:	NO2 000	003874			
The enclosed Office	cer/Director Re	esignation for	a Corporation	and fee are	submitted fo	r filing
Please return all co	orrespondence	concerning th	is matter to th	e following:		
Lawren	Name of P	erson)			, . ··	•
	(Name of Firm/	Company)	<u>.</u>			
27657	Old 41 (Addres	Road (SS)		, •		-
Bonita	Springs (City/State and	FL 34 Zip Code)	135			
For further inform	ation concernit	ng this matter,	please call:			
Lawren	ame of Person)	€	t (239 (Area Code	992-6 & Daytime T	4232 elephone Nu	mber)

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

Amendment Section Division of Corporations

TO:

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



The 15,000 Coalition Inc. (Name of Corporation) NO200003874 (Document Number, if known) Horida	NO20000 3874 , a corporation organized under the laws of the State of	Lawrence	Perer	, hereby resign	n as Dicector (Title)
NO200003874, a corporation organized under the laws of the State of (Document Number, if known) Horida	NO20000 3874, a corporation organized under the laws of the State of (Document Number, if known) Florida	The 15,	000 Coalific	on Inc. poration)	
Horida.	Horida	NO20000 (Document Number	3874 , a c r, if known)	orporation organized	d under the laws of the State of
		Florida			

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