

ND3000000308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

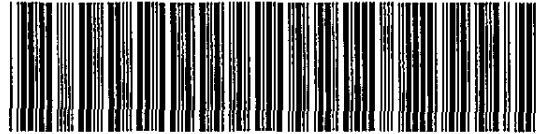
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
06 FEB -3 AM 9:41

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Adona Miracle FAITH MINISTRIES
(Name of Corporation)

DOCUMENT NUMBER: N03000000308

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

Please return all correspondence concerning this matter to the following:

Rosemary Brown
(Name of Person)

(Name of Firm/Company)

1410 NW 199th.
(Address)

MIAMI FL 33169.
(City/State and Zip Code)

For further information concerning this matter, please call:

Rosemary Brown at (786) 287-6492
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB -3 AM 9:41

I, Rosemary Brown, hereby resign as Director
(Title)
of Adonai Miracle Faith Ministries, Inc.
(Name of Corporation)
N63D00000308, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

Rosemary Brown
(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