(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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officer Resignation

T BROWN JUN 1 4 2005

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Miracle House in C (Name of Corporation)  DOCUMENT NUMBER: NO 30000 9397
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Willie MARY GIVENS (Name of Person)
P.O. Box 245954 Pembroke Pines, T-L 33024
(City/State and Zip Code)  For further information concerning this matter, please call:    Martine   Martine   Givens   at (186)   318-1395 (www.) (365) 494-4922 (Area Code & Daytime Telephone Number) (Call)

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 409 E. Gaines Street Tallahassee, FL 32399 OFFICER / DIRECTOR RESIGNATION FALLAHASSEE, FLORIDA

I, Willie MARY GivE/YS, hereby resign as Director	
of Miracle House Inc. (Name of Corporation)	,
ND 300009397 a corporation organized under the laws of the State of (Document Number, if known)	
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