

N05000002540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

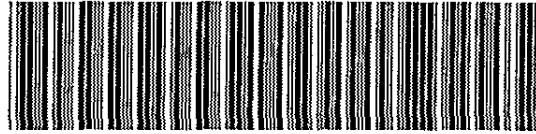
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

02

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ASSEMBLY OF THE FIRSTBORN MINISTRIES, INC.
(Name of Corporation)

DOCUMENT NUMBER: N05000002540

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

Please return all correspondence concerning this matter to the following:

Gaspard Maxon

(Name of Person)

ASSEMBLY OF THE FIRSTBORN MINISTRIES, INC.
(Name of Firm/Company)

17241 N.W. 9th. Place

(Address)

Miami, FL 33169

(City/State and Zip Code)

For further information concerning this matter, please call:

Gaspard Maxon

(Name of Person)

at (786) 738-4225

(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

Miami, Florida
July 20, 2006

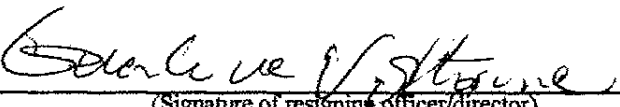
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GUERLINE VOLTAIRE, hereby resign as SECRETARY/DIRECTOR
(Title)

of ASSEMBLY OF THE FIRSTBORN MINISTRIES, INC.
(Name of Corporation)

N05000002540, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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

FILED
06 OCT 13 PM 1:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA