N05000004914

(Requestor's Name)		
(Address)		
(Address)		
(Cit	ry/State/Zip/Phone	e #)
PłCK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		s of Status
Special Instructions to Filing Officer:		

Office Use Only



300276292183

08/17/15--01025--008 **70.00



AUG 2 5 2015

C. CARROTHERS

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ST. SEBASTIAN FOUNDATION INC

(Name of Corporation)

DOCUMENT NUMBER: N05000004914

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

Please return all correspondence concerning this matter to the following:

FATHER PEDRO MEDINA

(Name of Person)

ST. SEBASTIAN FOUNDATION INC.

(Name of Firm/Company)

11195 SW 1st STREET #319

(Address)

MIAMI, FL. 33174

(City/State and Zip Code)

For further information concerning this matter, please call:

FATHER PEDRO MEDINA 786

(Name of Person)

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, MANUEL OROZCO	D , hereby resign as DIRECTOR
of ST. SEBASTIAN F	(Title)
	of Corporation)
N05000004914 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	
	·

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314