NO5000009054

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
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SECRETARY OF STATE

off. Resign.

MAR 2 4 2010

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Mentage - At d Civin' Inc. (Name of Corporation) DOCUMENT NUMBER: NO SOU OO O 9054
DOCUMENT NUMBER: NOSTUCIO 9054
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
PO BOX 10 22/ (Address)
St - PETE - Fd 33733-022/ (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (127) 321-4733 (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

I, Gloria C. Maxwell , hereby resign as VP (Title)

ALLAMASSEE FLORIDA

of Heritage - Art of Livin' Inc.

(Name of Corporation)

NOSODOTO 9054

(Document Number, if known)

Florida

Muulle (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