## NO5237

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
<b>(</b> Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

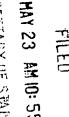
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Office Use Only



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## TRANSMITTAL LETTER

**Division of Corporations** SUBJECT: Saint Paul Missionary Baptist Church of Holly Hill, Inc. (Name of Corporation) DOCUMENT NUMBER: N05237 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Mitchell (Name of Person) Saint Paul Missionary Baptist Church (Name of Firm/Company) 1125 Graham Avenue (Address) Holly Hill, FL 32117 (City/State and Zip Code) For further information concerning this matter, please call: Michael Mitchell (Name of Person)

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

TO:

Amendment Section

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

APPROVED AND FILED

14 MAY 23 AM 10: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<sub>I,</sub> Bernette Harden	, hereby resign as Finance Secretary
ွှင် Saint Paul Missionary B	aptist Church of Holly Hill, Inc.
(Name of Corp	
N05237 (Document Number, if known), a co	orporation organized under the laws of the State of
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