## N0600000 1695

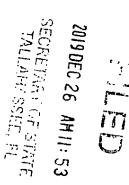
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600338263756

12/28/19--01011--009 ++95.00



O SIMMONA. JAN 28 2020

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MINISTERIOS HOSANNA INTERNACIONAL, INC. (Name of Corporation)
DOCUMENT NUMBER: <u>NO600001695</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ALFREDO HERNANDEZ (Name of Person)
MINISTERIOS HOSANNA INTERNACIONAL, INC. (Name of Firm/Company)
17040 NE 47H PL (Address)
NORTH MIAMI BEACH, FL 33162 (City/State and Zip Code)
For further information concerning this matter, please call:
ALFRE DO HERNANDE Z at (305) 343 - 5941 (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. ALFREDO HERNANDEZ, hereby resign as ASST. TREA	<u> </u>	ER	
of MINISTERIOS HOSANNA INTERNACIONAL, INC. (Name of Corporation)		·	
NO 6000016 95 , a corporation organized under the laws of the S (Document Number, if known)		2(	
FLORIDA	EOREE	2019 DEC	.: 4 . } !
	TS 25	26	
Alfredo Hernaliz (Signature of resigning officer/director)	STATE	AH II: 53	-

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