

ND60000002429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

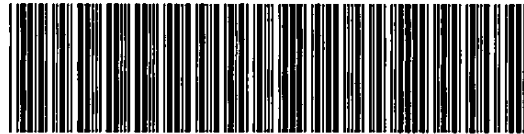
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Spiritist Center Love and Charity, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N06000002429

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

Please return all correspondence concerning this matter to the following:

Enio Carvalho

(Name of Person)

Spiritist Center Love and Charity, Inc.

(Name of Firm/Company)

8421 S orange Blossom Trail - unit 261

(Address)

Orlando - FL - 32809

(City/State and Zip Code)

For further information concerning this matter, please call:

Enio Carvalho

(Name of Person)

at ( 407 ) 616.0439

(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:**

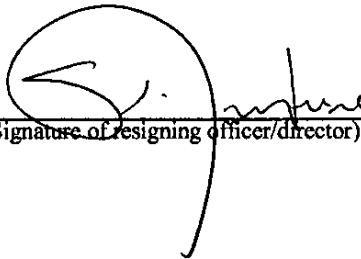
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Ana S. Freire, hereby resign as Director.  
(Title)

of Spiritist Center Love and Charity, Inc.,  
(Name of Corporation)

N06000002429, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

  
(Signature of resigning officer/director)

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**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