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(Re	questor's Name)	
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(Cn	y/State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TARDR MINISTERS (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VIVIAN (Name of Person)
(Name of Firm/Company) 1864 N. W. 935 Terr. (Address)
Miami Fla 33147 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (3D5) 691-0278 (Area Code & Daytime Telephone Number) 3D5-3187877- Cell H
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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Driver L. Mober	n, hereby resign as United Presented
of MT. Dalow (Name o	of Corporation)
(Document Number, if known)	_, a corporation organized under the laws of the State of

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

TO MAR 22 PH 2: 38