## N. DODOO 9179

(Re	questor's Name)	
		<u>.</u>
· (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		i
N		
•		:

Office Use Only



000111630370

11/05/07--01006--014 \*\*35.00

2007 NOV -5 PM 1: 08

ls ulilos o/sle

## **COVER LETTER**

Division of Corporations
SUBJECT: WITH HIS YOKE MINISTRY, INC (Name of Corporation)
DOCUMENT NUMBER: N 06 00 000 9179
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
LYNNE HAMMOCK (Name of Person)
WITH HIS YOKE MINISTRY  (Name of Firm/Company)
4517 PARK S+ (Address)
JACKSONVILLE, FL 32205 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (904) 384-4735 (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
1 (ALC 12)

DIVISION OF CORPORATIONS

## OFFICER / DIRECTOR RESIGNATION -5 PM 1:08 FOR A CORPORATION

, DAVID SMITH	, hereby resign as	DIRECTOR (Title)
of WITH HIS YOKE (Name	MINISTRY, INC. of Corporation)	
N0600000 9179 (Document Number, if known)	_, a corporation organized und	er the laws of the State of
FLORIDA	_·	
<u></u>	. /	1/2/07

## FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314