Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : Ala REGISTERED AGENT INC.

Account Number : I20090000032

Phone Fax Number

: (866)703-8828 : (561)202-8082

Enter the email address for this business entity to be used for futurers annual report mailings. Enter only one email address please.

RECISTERED AGENT RESIGNATION VILLAGE OF VISION FOR HAITI FOUNDATION INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87,50

Electronic Filing Menu Corporate Filing Menu

Help

H12000097193 3

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

<u>-</u>	507.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, A1	IA REGISTERED AGENT, INC.	_
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	VILLAGE OF VISION FOR HAITI FOUNDATIO	M INC.
	(Name of Corporation)	
N06000009293		
(Document Number, if known)		
A copy of this resignation was mailed to	to the above listed corporation at its last known address	S .
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on which	
Timaff	Male's igniture of Resigning Agent)	
If signing on behalf of an entity:	12	IIVIE III
TINA MAKI	PR	20
((Typed or Printed Name)	
PRESIDENT	? . ?:	THE PORT
	(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tellahassee, FL 32314

H12000097193 3