

ND 700000 1847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LIVING WATERS CHRISTIAN CENTER INC
(Name of Corporation)

DOCUMENT NUMBER: N07000001847

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

Please return all correspondence concerning this matter to the following:

Rosalba Ojeda

(Name of Person)

None

(Name of Firm/Company)

296 Via Tuscany Loop

(Address)

Lake Mary, FL 32746

(City/State and Zip Code)

For further information concerning this matter, please call:

Rosalba Ojeda

(Name of Person)

at (321) 356-8264

(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**

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I, Rosalba Ojeda, hereby resign as TRE
(Title)

of LIVING WATERS CHRISTIAN CENTER INC,
(Name of Corporation)

N07000001847, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Rosalba Ojeda
(Signature of resigning officer/director)

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