

N07000003969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

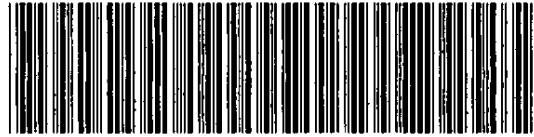
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 JUL 16 PM 3:35

FILED

O/D Resign.

07/22/08

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Alvin White Jr Pastoral Ministries INC
(Name of Corporation)

DOCUMENT NUMBER: N07000003969

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

Please return all correspondence concerning this matter to the following:

Pastor Alvin White Jr

(Name of Person)

Alvin White Jr Pastoral Ministries INC

(Name of Firm/Company)

5036 Dr Phillips Blvd #246

(Address)

Orlando, Florida 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

Pastor Alvin White Jr

(Name of Person)

at (407) 8229224

(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, Pastor David Jones, hereby resign as Officer
(Title)

of Alvin White Jr. Pastoral Ministries, INC.
(Name of Corporation)

N07000003969, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

David W. Jones
(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

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TALLAHASSEE, FLORIDA