1101000008246

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(Red	juestor's Name)	
(Add	lress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to F	iling Officer:	
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SECRETARY OF STATEMS
UNVISION OF CORPORATIONS
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COVER LETTER

TQ:	Amendment Section Division of Corporations
SUBJ	PROJECT AKILAH, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: N07000008246
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please	e return all correspondence concerning this matter to the following:
LISA	A SHASTEEN .
·•	(Name of Person)
	(Name of Firm/Company)
2920	HARBOR VIEW AVENUE WEST
	(Address)
TAN	IPA, FL 33611
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
LISA	SHASTEEN at (813) 220-3000 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Clifto 2661	Address: dment Section on of Corporations n Building Executive Center Circle assee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Jadies & Struttemen,

Please note that this
resignation should be effective
as of 10/28/2011.

Thank you!

Whish Strutain
813-220-3000

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{I.} LISA SHASTEEN	, hereby resign as DIRECTOR	
	(Title)	
of PROJECT AKILAH, INC.		
	me of Corporation)	
N07000008246	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
		

(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

DIVISION OF CORPORATION