

NO 600305386356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

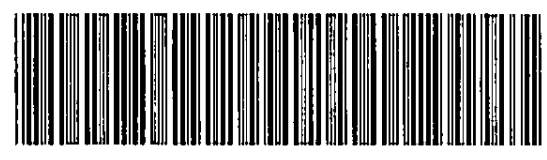
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600305386356

11/09/17--01008--005 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 NOV -9 PM 3:03
FILED

OLD P.S.
R. WHITE
NOV 13 2017
13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NO DELTA CHAPTER OF THE CHI PHI FRATERNITY
(Name of Corporation)

DOCUMENT NUMBER: ND 8000007111

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

Please return all correspondence concerning this matter to the following:

NICHOLAS ABRAHAMS
(Name of Person)

(Name of Firm/Company)

1028 DRUID DRIVE
(Address)

MAITLAND, FL 32751
(City/State and Zip Code)

For further information concerning this matter, please call:

NICHOLAS ABRAHAMS at (321) 501-3474
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

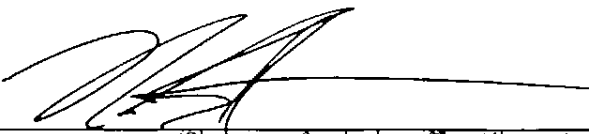
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, NICHOLAS ABRAHAMS, hereby resign as D
(Title)

of CHI PHI FRATERNITY - NO DELTA CHAPTER
(Name of Corporation)

NO8000007111, 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 NOV -9 PM 3:03

FILED