N0800007845

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	()
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Seniors Support Fund, Inc.
(Name of Corporation)
DOCUMENT NUMBER: N08000007845
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Joshua M. Sachs
(Name of Person)
(Name of Firm/Company)
7680 Universal Blvd., Ste 100
(Address)
Orlando, FL 32819
(City/State and Zip Code)
For further information concerning this matter, please call:
Joshua Sachs at (407) 248-8686 (Name of Person) (Area Code & Daytime Telephone Number
(Name of Person) (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,	_, hereby resign asDirector			
A)	, noreey resign us	(Title)		
of Seniors Support Fund, Inc.				,
(Name of	Corporation)			
N08000007845	, a corporation organized under the laws of	f the State	of	
(Document Number, if known)		******		
Floirida		ALLANASSEE, FLOR	10 JAN 27 PM 1:59	TICED
	gnature of resigning officer/director)	— ₽ =	59	

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