

**No 8000008409**

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(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

*C. Coulliette*

**C.COULLIETTE**

**MAR 12 2009**

**EXAMINER**

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Hand of Change Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N08000008409

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

Please return all correspondence concerning this matter to the following:

Joan M. Halliwell  
(Name of Person)

Hand of Change Inc.  
(Name of Firm/Company)

2105 Mietaw Drive  
(Address)

Sarasota FL 34239  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joan M. Halliwell at ( 941 ) 720-0748  
(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, Joan M. Halliwell, hereby resign as Secretary  
(Title)

of Hand of Change Inc  
(Name of Corporation)

N08000008409, a corporation organized under the laws of the State of  
(Document Number, if known)

  
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

**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