

N08 000010749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

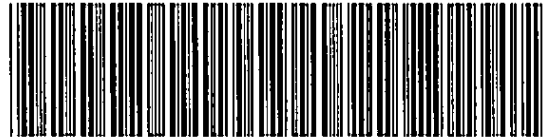
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000346841670

06/26/20--01015--002 **35.00

FILED
CLERK OF STATE
AT THE CLERK'S OFFICE
20 JUN 26 AM 11:45

old Resignation

AUG 17 2020

D CUSHING

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Star of Hope 4Kids International Inc
(Name of Corporation)

DOCUMENT NUMBER: N08000010749

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

Please return all correspondence concerning this matter to the following:

Clayton M Vojevodovas
(Name of Person)

(Name of Firm/Company)

6000 NE 22nd Way, apt 7H
(Address)

Fort Lauderdale, FL. 33308
(City/State and Zip Code)

For further information concerning this matter, please call:

Clayton M Vojevodovas at 954 4770880
(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

RECEIVED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
20 JUN 25 AM 11:45

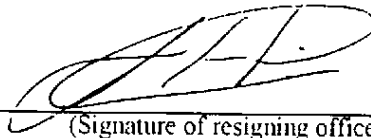
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Clayton M Vojevodovas, hereby resign as VD
(Title)

of Star of Hope 4Kids International, Inc
(Name of Corporation)

N08000010749, 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

FILED
DEPT. OF STATE
DIV. OF CORPORATIONS
20 JUN 25 AM 11:45