N09000000999

| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| (Ac | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | MAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
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| | | |

Office Use Only



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05/29/14--01017--004 **35.00

010 Resign. 06-18-14

TRANSMITTAL LETTER

Division of Corporations Unity Place Housing, Inc. SUBJECT: (Name of Corporation) DOCUMENT NUMBER:_N09000000999 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: George Ortiz (Name of Person) George Ortiz (Name of Firm/Company) 1515 E Silver Springs Blvd, Ste 204 (Address) Ocala, FL 34470 (City/State and Zip Code) For further information concerning this matter, please call: George Ortiz Enclosed is a check for \$35.00 made payable to the Florida Department of State.

<u>Street Address:</u>

Amendment Section

Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| Theresa Salvino | , hereby resign as Director |
|---|--|
| ., | (Title) |
| _{of_} Unity Place Housing, In | |
| (Name of Corporate N09000000999 , a corporate (Document Number, if known) | oration organized under the laws of the State of |
| Florida | |
| Murse L (Signature of | Schuceresigning officer/director) |
| FILING I | FEE IS \$35.00 |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to:

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