

ND9000004531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

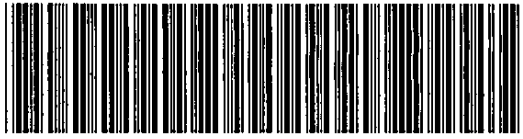
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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500261382925

*Resignation
to officer*

06/19/14--01004--001 **35.00

FILED
2014 JUN 19 PM 2:56
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

*DR
7/7/14*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Anthony "Dr. V" Virginia Foundation Inc. For Economic Freedom
(Name of Corporation)

DOCUMENT NUMBER: NO9000004531

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

Please return all correspondence concerning this matter to the following:

DALE SUMMERFORD
(Name of Person)

(Name of Firm/Company)

PO Box 817
(Address)

QUINCY FL. 32353
(City/State and Zip Code)

For further information concerning this matter, please call:

DALE SUMMERFORD at (850) 627-7255
(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**

FILED
2014 JUN 19 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DALE SUMMERFORD, hereby resign as DIRECTOR
(Title)

of ANTHONY "DR Y" VIEGGESIE FOUNDATION INC FOR ECONOMIC FREEDOM
(Name of Corporation)

N09000004531, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

Dale Summerford
(Signature of resigning officer/director)

STATEMENT OF FACT: I hereby certify my name was added without
my knowledge. Dale Summerford

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