NC900CCC SUB

| equestor's Name) | | | |
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| ldress) | | | |
| (Address) | | | |
| ty/State/Zip/Phone | #) | | |
| ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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2018 MAY 21 AN II: 82 SECRETARY OF STATE

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TRANSMITTAL LETTER

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SECRETARY OF STATE TALLAHASSEE, FLORID.

TO: Amendment Section Division of Corporations

| SURJECT: Sisters of Sain | nt Joseph Benedict Cottolengo, Inc. |
|---|---|
| SOBSECT. | (Name of Corporation) |
| DOCUMENT NUMBER:N | 109000008645 |
| The enclosed Officer/Director F | Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence | e concerning this matter to the following: |
| Sister Filomena M | Mastrangelo |
| (Name of | Person) |
| Sisters Of Saint Joseph Ben | edict Cottolengo, Inc. |
| (Name of Firm | n/Company) |
| 15701 NW 37th A | Avenue |
| (Addr | ess) |
| Miami Gardens, I | |
| (City/State an | d Zip Code) |
| For further information concern | ing this matter, please call: |
| Sister Lidia Valli | at (786 972 5364 (Area Code & Daytime Telephone Number) |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 i | 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 |



May 2, 2018

SISTER FILOMENA MASTRANGELO SISTERS OF SAINT JOSEPH BENEDICT 15701 NW 37TH AVENUE MIAMI GARDENS, FL 33054

SUBJECT: SISTERS OF SAINT JOSEPH BENEDICT COTTOLENGO, INC.

Ref. Number: N09000008645

We have received your document for SISTERS OF SAINT JOSEPH BENEDICT COTTOLENGO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

You failed to list the new registered agent/registered office in the space provided in part 6 of the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 018A00009043

www.sunbiz.org

District ACC Control DO DOY COOR IN HILL CO. IN CL. CO.

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| Sister Carla Valentir | hereby resign as | I reasurer (Title) |
|-------------------------|--|---|
| of Sisters of Saint Jos | eph Benedict C | ottolengo, Inc. |
| N09000008645 | , a corporation organized und | ler the laws of the State of |
| Florida | | |
| Sinter Co | cle Volentices gnature of resigning officer/director | PILE 2018 MAY 21 SECRE TARY TALLAHASSE |

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