

N10000005607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

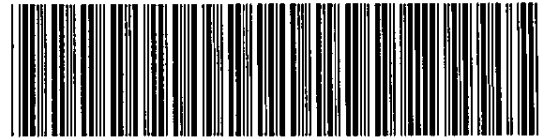
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Seth
Give permission
to correct Corp.
Name.
4/23/14
DC

Office Use Only



000259046400

04/21/14--01026--006 **70.00

RECEIVED
DEPARTMENT OF STATE
14 APR 21 AM 11:57

FILED
14 APR 21 PM 4:52
RECEIVED
DEPARTMENT OF STATE

O/D
Resign.

4/30/14
DC

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Biddix-~~Family~~ Charitable Foundation Inc.

- ☒ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
☒ Merger File _____
☒ Art. of Amend. File _____
____ RA Resignation _____
☒ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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14 APR 21 AM 11:44

Signature _____

Requested by: SETH

04/21/14

Name

Date

Time

Walk-In

Will Pick Up

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **BIDDIX CHARITABLE FOUNDATION, INC.**
(Name of Corporation)

DOCUMENT NUMBER: **N10000005607**

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

Please return all correspondence concerning this matter to the following:

Tim McWilliams

(Name of Person)

Biddix Family Charitable Foundation Inc.

(Name of Firm/Company)

1451 Morgan Ct

(Address)

Melbourne FL 32934

(City/State and Zip Code)

For further information concerning this matter, please call:

Tim McWilliams

(Name of Person)

at **(321) 961-3900**

(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

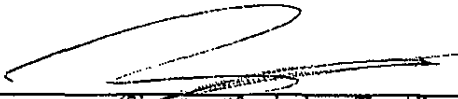
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Tim McWilliams, hereby resign as STD (Secretary, Treasurer Director)
(Title)

of BIDDIX CHARITABLE FOUNDATION, INC.
(Name of Corporation)

N10000005607, 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
14 APR 21 PM 4:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA