

N1000000008340

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

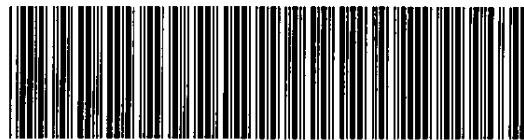
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SURVIVING WARRIORS INC  
(Name of Corporation)

**DOCUMENT NUMBER:** N10000008340

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

Please return all correspondence concerning this matter to the following:

TINA WILSON-PHILIP

(Name of Person)

SURVIVING WARRIORS, INC

(Name of Firm/Company)

531 NW 143 STREET

(Address)

N MIAMI, FLORIDA 33168

(City/State and Zip Code)

For further information concerning this matter, please call:

SUSAN BEST-RODRIGUEZ

(Name of Person)

at ( 786 ) 493-0442

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

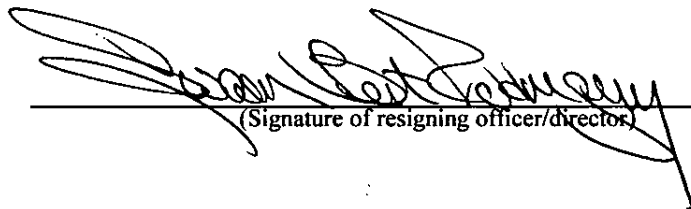
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, SUSAN BEST-RODRIGUEZ, hereby resign as PRESIDENT  
(Title)

of SURVIVING WARRIORS INC.  
(Name of Corporation)

N10000008340, 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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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