

N10000009753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2011 MAR -7 A 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mission of Hope Fund, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N10000009753

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

Please return all correspondence concerning this matter to the following:

Jacqueline Stream  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

12731 Water La.  
(Address)

Fort Myers, Fl. 33908  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jacqueline Stream at ( 239 ) 246-1655  
(Name of Person) (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**

**FILED**

2011 MAR -7 A 8:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Jaqueline Stream, hereby resign as president  
(Title)  
of Mission of Hope Fund, Inc.  
(Name of Corporation)

N10000009753, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Jaqueline Stream  
(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