

N110000000252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

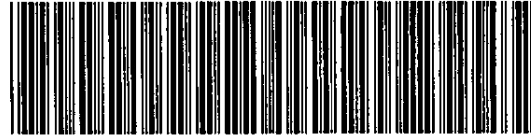
(Business Entity Name)

(Document Number)

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C McNAIR

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Newness of Life Center of Success Enterprises, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N11000000252

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

Please return all correspondence concerning this matter to the following:

Syrian McConnico

(Name of Person)

(Name of Firm/Company)

769 Pine Island Dr

(Address)

Melbourne FL 32940

(City/State and Zip Code)

For further information concerning this matter, please call:

Syrian McConnico at **321 2716454**

(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

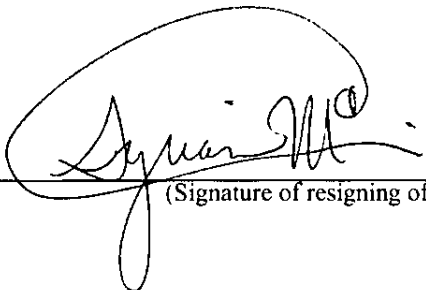
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Syrian McConnico, hereby resign as Secretary
(Title)

of Newness of Life Center of Success Enterprises, Inc.
(Name of Corporation)

N11000000252, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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F M S D

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