

N110000002329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

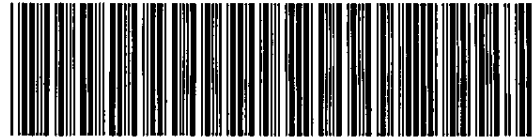
(Business Entity Name)

(Document Number)

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14 MAY -5 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. LEWIS
MAY 14 2014
EXAMINER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

The N.O.W. Matters More Foundation, Inc.

SUBJECT: _____ (Name of Corporation)

DOCUMENT NUMBER: N11000000329

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

Please return all correspondence concerning this matter to the following:

Denise F. Solis

(Name of Person)

The N.O.W. Matters More Foundation, Inc.

(Name of Firm/Company)

5036 Dr. Phillips Blvd., Suite 137

(Address)

Orlando, FL 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

Denise F. Solis 321 287-9329

(Name of Person)

at ()
(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**

APPROVED
AND
FILED

14 MAY -5 PM 12:41

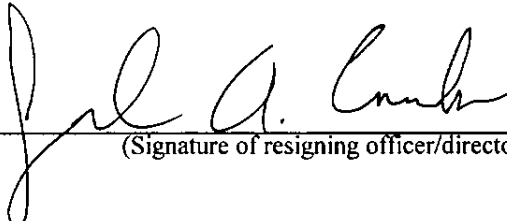
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jared C. Combs President
I, _____, hereby resign as _____
(Title)

The N.O.W. Matters More Foundation, Inc.
of _____,
(Name of Corporation)

N11000000329

_____, 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