84 Radoun

	(Requestor's Name)	_	
	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT	MAIL.	
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of S	Status	
Special Instructions to Filing Officer:			





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00 2013 MAR 06 2013 R. WHITE 13 FEB 27 M 10:5 SECRETARY OF STATE ALLAMASSEE, FLORID

TRANSMITTAL LETTER

то:	Amendment Section Division of Corporations
SUBI	NORTHWEST DADE YOUTH DEVELOPMENT INC. (Name of Corporation)
DOC	UMENT NUMBER: N12000001748
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
MA	RTINE J. MILLER
	(Name of Person)
	(Name of Firm/Company)
60	73 N.W. 167 STREET - C7
	(Address)
MI	AMI, FL 33015
	(City/State and Zip Code)
	arther information concerning this matter, please call:
MA	(Name of Person) at (786) 663-9790 (Area Code & Daytime Telephone Number)
	osed is a check for \$35.00 made payable to the Florida Department of State.
Divis P.O. I	ing Address: Indiment Section Ion of Corporations Box 6327 Inassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, MARTINE J. MILLER , hereby res	sign as TREASURER
7	(Title)
NORTHWEST DADE YOUTH D	DEVELOPMENT INC.
(Name of Corporation) N1200001748 (Document Number, if known) , a corporation organ	ized under the laws of the State of
FLORIDA	
Marture Mille Signature of resigning office	cer/director) Ξ
	FILE 27 CRETAINS
FILING FEE IS \$35.0	

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314