MQC	
(Requestor's Name) (Address) (Address)	600271581996
(City/State/Zip/Phone #)	04/13/1501014002 **35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	HALLAHASSEE, FLORIDA ALLAHASSEE, FLORIDA APR 14 2015 R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

Taise & Worship Deliverance Outreach Ministries Inc., **SUBJECT:**

DOCUMENT NUMBER: N12000029710

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

Please return all correspondence concerning this matter to the following:

Nylean Williams (Name of Person) NA (Name of Firm/Company) 2659 NE 35th Str. PMB#76 Ocala FL 34479 (City/State and Zip Code)

For further information concerning this matter, please call:

Name of Person) at (352) 304-1456 (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

r.

1, Nyleah Williams, hereby resign as (TC) Treasurer and Chairman of Praise & Worship Deliverance Outreach Ministries Inc., (Name of Corporation) N12 00000 29710, a corporation organized under the laws of the State of (Document Number, if known) Florida

yleah Williams - Jackson (Signature of resigning officer/d/ector)

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



*