

N12000005656

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Orlando Metro Friendship Movement  
(Name of Corporation)

**DOCUMENT NUMBER:** N12000005656

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

Please return all correspondence concerning this matter to the following:

Donna M. Goerner

(Name of Person)

The Law Office of Donna M. Goerner, P.A.

(Name of Firm/Company)

2180 W. State Rd. 434, Ste. 2150

(Address)

Longwood, FL 32779

(City/State and Zip Code)

For further information concerning this matter, please call:

Donna M. Goerner

(Name of Person)

at ( 407 ) 478-5900

(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

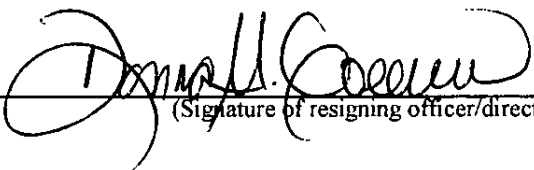
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Donna M. Goerner, hereby resign as Treasurer  
(Title)

of Orlando Metro Friendship Movement, Inc.  
(Name of Corporation)

N12000005656, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

**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