## N/300000a187

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

Office Use Only



100253133951

11/01/13--01003--001 \*\*35.00

SECRETARY OF STATE PALLAHASSEE, FLORIDA

FILED

C. LEWS

NOV 5 2013

EXAMINER

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Allen West Juano Ian Tune (Name of Corporation)
DOCUMENT NUMBER: N 1300000000000000000000000000000000000
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DR. Joseph A. Finky G.  (Name of Person)  Allen West Foundation  (Name of Firm/Company)  640 Congress Ave 54. 2050  (Address)
Boca Rata Fl 33487 (City/State and Zip Code)
For further information concerning this matter, please call:
On. Joseph A. Finley In. at (561) 997-6776 (Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

APPROVED AND FILED

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

13 NOV - 1 PM 4: 33

SECRETARY OF STATE FALLAHASSEE, FLORIDA

1, <u>Jose</u>	ob Fin	nley	_, hereby resign	nas Direct	to & Se	cretary
of K	Men	West	/ 100 00	lan Fu	- 0 -	۔ <u>۱۲</u> ,
		(Name of Corporat	tion)		•	
N130000		, a corpo	oration organized	d under the laws	of the State of	f
(Documer	nt Number, if known	)				
Flor	RIDA	·				

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