## N13000003107

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	<u>-</u>
PICK-UP WAIT	MAIL.
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Sta	tus
Special Instructions to Filing Officer:	;

Office Use Only

÷



900289964799

09/12/16--01021--022 \*\*35.00

2016 SEP 12 AM 8: 25

DIVISION OF CORPORATE

SEPABAOIO CLEV

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Zion Baptist Church of Palm Coast
(Name of Corporation)
DOCUMENT NUMBER: N13000003107
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Urita Hodge
(Name of Person)
Zion Baptist Church of Palm Coast
(Name of Firm/Company)
3 Woodhaven Drive
(Address)
Palm Coast, Fl 32164
(City/State and Zip Code)
For further information concerning this matter, please call:

Urita Hodge
(Name of Person)

at (386 ) 447-6094
(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

September 9, 2016

Florida Department of State Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

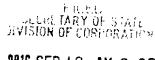
To Whom It May Concern:

Enclosed you will find my transmittal letter, Officer/Director Resignation for a Corporation and my \$35.00 check. Never gave permission to be listed to Zion Baptist Church of Palm Coast as its Deacon . Under no circumstances should my name be associated.

Yours truly

Urita Hodge

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



2016 SEP 12 AM 8: 25

<sub>ı,</sub> <u>Urita Hodge</u>	, hereby resign as Deacon (Title)	
<sub>օք</sub> Zion Baptist Church		
(Name	of Corporation)	
N13000003107 (Document Number, if known)	a corporation organized under the laws of the State of	
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