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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Congregation Mekor Shalom, Inc.

(Name of Corporation)

DOCUMENT NUMBER:\_\_\_\_\_

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yael Hatfield, President

(Name of Person)

Congregation Mekor Shalom, Inc.

(Name of Firm/Company)

14005 A North Dale Mabry Highway

(Address)

TAMPA, FL 33618

(City/State and Zip Code)

For further information concerning this matter, please call:

 Hazzan Jodi Sered-Lever
 at (
 963-1818

 (Name of Person)
 (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

## Mailing Address:

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

## Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303