

N13000004971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

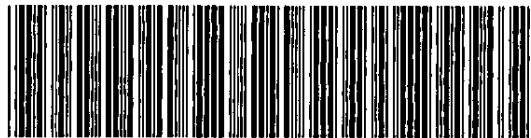
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

old Resignation

AUG 09 2016

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Escudo de Ae Ministries Corp
(Name of Corporation)

DOCUMENT NUMBER: N1300000471

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

Please return all correspondence concerning this matter to the following:

Norge Arnai2
(Name of Person)

(Name of Firm/Company)

16719 SW 54th Ct
(Address)

MIRUMAR 71 33027
(City/State and Zip Code)

For further information concerning this matter, please call:

Norge Arnai2 at (305) 796-7239
(Name of Person) (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

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TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Norge Arnairz, hereby resign as Director
(Title)

of Escudo De Fe Ministries Corp
(Name of Corporation)

N13000004971, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Norge Arnairz
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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