N13000010453	
(Requestor's Name) (Address) (Address)	000254387890
(City/State/Zip/Phone #)	12/11/1301011012 **35.00
Certified Copies Certificates of Status	APPROVED AND FILED SECRE LARY OF STATE TALLAHASSEE, FLORID,
Office Use Only	C. LEWIS DEC 1 6 2013 EXAMINER

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#### TRANSMITTAL LETTER -

**ȚO:** Amendment Section Division of Corporations

## SUBJECT: My Father's Table Ministries, Inc

(Name of Corporation) DOCUMENT NUMBER: 11-13000010453

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

Please return all correspondence concerning this matter to the following:

**Robin Questel** 

(Name of Person)

# My Father's Table Ministries, Inc

(Name of Firm/Company)

6454 Scott Street

(Address)

## Punta Gorda, FL 33950

(City/State and Zip Code)

For further information concerning this matter, please call:

## Henry Idlette

(Name of Person)

39 ,601-6448

(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

CR2E044 (05/13)

# APPROVED AND FILED OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION 13 DEC 11 PM 4: 16 SECRETARY DF 5 TAPE IALLAHASSEE. FLORIDA SECRETARY DF 5 TAPE IALLAHASSEE. FLORIDA (Title) of My Father's Table Ministries, Inc (Name of Corporation) N-13000010453 (Document Number, if known) Florida

#### FILING FEE IS \$35.00

(Signature of resigning

Make checks payable to Florida Department of State and mail to:

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