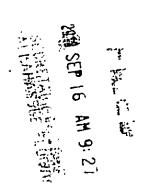
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i	
<del>-</del> (	Requestor's Name)
	Address)
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((	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(	Business Entity Name)
	Document Number)
`	,
Certified Copies	Certificates of Status
ii	
Special Instructions	to Filing Officer:
<u> </u>	Office Use Only



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## TRANSMITTAL LETTER

	nent Section i of Corporations
SUBJECT:	Tesus Heart (Name of Corporation)
DOCUMENT	NUMBER: N14000001596
The enclosed O	fficer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all	correspondence concerning this matter to the following:
_ Jani	(Name of Person)  Sesus Heart (Name of Firm/Company)
	Name of Firm/Company)
Po	Box 995 Shalinav, Fl. (Address)
	Shali mar, F1 3a579 (City/State and Zip Code)
For further info	rmation concerning this matter, please call:
Janice	(Name of Person) at (SSO) SSQ-5-333 (Area Code & Daytime Telephone Number)
Enclosed is a ch	neck for \$35,00 made payable to the Florida Department of State.
Mailing Addre Amendment Sec Division of Con P.O. Box 6327 Tallahassee, FL	tion Amendment Section porations Division of Corporations 2661 Executive Center Circle

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION
I. Tanny Morre hereby resign as Vice - Aresident ?
of JCSUS Heart (Name of Corporation)
N1400001596 a corporation organized under the laws of the State of (Document Number, if known)
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