

N14000002959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
15 AUG 13 PM 1:12

AUG 14 2015  
C LEWIS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** No Paws Left Behind Rescue Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** N14000002959

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

Please return all correspondence concerning this matter to the following:

**Lisa Milk**

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

4149 NW 34th Way

\_\_\_\_\_  
(Address)

Lauderdale Lakes, FL 33309

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**Lisa Milk**

\_\_\_\_\_  
(Name of Person)

at ( 305 ) 609-9500

\_\_\_\_\_  
(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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

15 AUG 13 PM 1:12

I, Lisa Milk, hereby resign as VP1  
(Title)

of No Paws Left Behind Rescue Inc.  
(Name of Corporation)

N14000002959, 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