## N14000004458

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies		
Special Instructions to Filing Officer:		
		!





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04/20/15--01043--004 \*\*35.00





## TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations** Nurturing Dreamz Outreach, Inc. (Name of Corporation) DOCUMENT NUMBER: N14000004458 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Susan Spalding (Name of Person) Spalding Business Solutions, Inc. (Name of Firm/Company) 3676 Sanctuary Way South (Address) Jacksonville Beach, FL (City/State and Zip Code) For further information concerning this matter, please call: Susan L. Spalding Area Code & Daytime Telephone Number) (Name of Person)

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

<sub>I,</sub> Susan L. Spalding	, hereby resign as Treasurer	
of Nurturing Dreamz	Outreach, Inc.	
N14000004458  (Document Number, if known)	of Corporation), a corporation organized under the laws of the State of	
Florida	_ <del>·</del>	
- Sura	ignature 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