

N14000009128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATE AFFAIRS
15 SEP -9 AM 7:46

SEP 14 2015

C LEWIS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kingdom Life Empowerment Center

(Name of Corporation)

DOCUMENT NUMBER: N14000009128

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

Please return all correspondence concerning this matter to the following:

Mildred Watson

(Name of Person)

Kingdom Life Empowerment Center

(Name of Firm/Company)

3706 Moondancer Place

(Address)

Saint Cloud, FL 34772

(City/State and Zip Code)

For further information concerning this matter, please call:

Mildred Watson

(Name of Person)

at **407** **593-2293**

(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 SEP -9 AM 7:46

I, Mildred Watson, hereby resign as Director
(Title)

of Kingdom Life Empowerment Center, Inc.
(Name of Corporation)

N14000009128, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Mildred Watson
(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