

N 14 00000 9866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

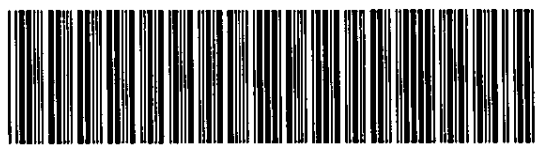
(Business Entity Name)

(Document Number)

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S TALLENT
JAN 09 2017

OLD-Resign

FILED
17 JAN -3 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Eye Opener Missionary Ministries, Inc.

(Name of Corporation)

DOCUMENT NUMBER: N14000009866

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

Please return all correspondence concerning this matter to the following:

Charlena Minus-TaliaFerro

(Name of Person)

(Name of Firm/Company)

16770 NW 13 Street

(Address)

Pembroke Pines, FL 33028

(City/State and Zip Code)

For further information concerning this matter, please call:

Charlena Minus-TaliaFerro at **954 5344426**

(Name of Person)

(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

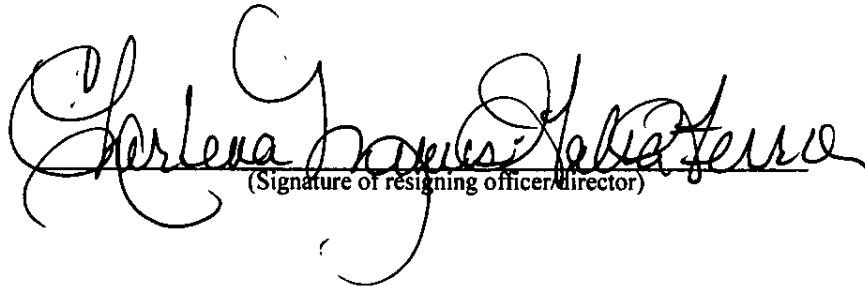
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Charlena Minus-TaliaFerrc, hereby resign as Director
(Title)

The Eye Opener Missionary Ministries, Inc.
(Name of Corporation)

N14000009866, 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

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TALLAHASSEE, FLORIDA