N14000010376

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)	_	
Certified Copies Certificates of Status	_	
Special Instructions to Filing Officer:		





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15 APR 20 PH I2: 20

x4/24

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
	ECT: National Association of Black Enrolled Agents (Name of Corporation)
DOC	UMENT NUMBER: N14000010376
The er	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Jas	son H Daughtry
	(Name of Person)
	(Name of Firm/Company)
209	9 Pheasant Run Rd
	(Address)
Ма	ys Landing, NJ 08330
-	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Jas	Son H Daughtry (Name of Person) at (609) 214-8712 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.00 made payable to the Florida Department of State.
Amend Division P.O. B	dment Section Amendment Section on of Corporations Sox 6327 2661 Executive Center Circle assee, FL 32314 Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE TALLAHASSEE. FLORID,

15 APR 20 PM 12: 20

_{ı,} Jason H Daughtry	, hereby resign as President (Title)
	ciation of Black Enrolled Agents, INC
N14000010376 (Document Number, if known)	ne of Corporation), a corporation organized under the laws of the State of
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