

N16 000 009 760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

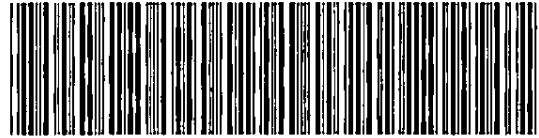
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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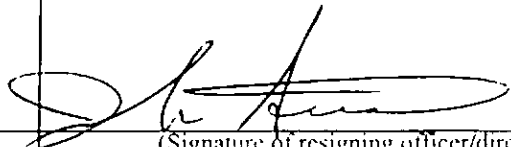
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, John Siamas, hereby resign as CFO/Treasurer
(Title)

of Warriors Choice Foundation, Inc.
(Name of Corporation)

N16000009760, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

TALLAHASSEE, FLORIDA

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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