NI700005115

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	isiness Entity Nan	ne)
(De	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	lv

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SEP 0 6 2018 I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: HELP ME TO HELP THE OCEAN FOUNderfich, INC

(Name of Corporation)

DOCUMENT NUMBER: N17000005118

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

Please return all correspondence concerning this matter to the following:

BEATRIZ HOFMANN

(Name of Person)

(Name of Firm/Company

12600 SW 45TH STREET

- ddress l

MIAMI. FL, 33175

(Citv/State and Zip Code)

For further information concerning this matter, please calc

_{at (}908 **BEATRIZ HOFMANN .472236**8

(Name of Person)

(Area Code & Daytime Telephone Number)

Inclosed is a check for \$35.00 made pavable to the Florida Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Secur: Division of Corporation 2661 Executive Center Circie Tallahassee, FL 3230



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2018

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BEATRIZ HOFMANN 12600 SW 45TH STREET MIAMI, FL 33175

SUBJECT: HELP ME TO HELP THE OCEAN FOUNDATION, INC. Ref. Number: N17000005115

We have received your document for HELP ME TO HELP THE OCEAN FOUNDATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 718A00017600

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Make checks payable to Florida Department of State and man t.

Amendment Section Vision of Corporations (2) Box 6327 Uanassee, Fiorida 32314