

(Requi	estor's Name)	-
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PICK-UP	☐ WAIT	MAIL
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R. WHITE 'JAN 3 1 2018

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: New hife Community Inc. (Name of Corporation) DOCUMENT NUMBER: N 170 00006 89
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Alisa Johnson (Name of Person)
(Name of Firm/Company)
P.O. Box 5901 (Address)
Deltma, FL 32728 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (386) 848-1815 (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

TO:

Amendment Section

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Ali 50 JONYOON, hereby resign as VP/Treas	surer Directo
of New Life Community Inc.	· · · · · · · · · · · · · · · · · · ·
(Document Number, if known), a corporation organized under the laws of the	ne State of
Florida	
(Signature of resigning officer/director)	25/18
	18 JAN 29
FILING FEE IS \$35.00	A C

Amendment Section
Division of Corporations
P.O. Box 6327

Make checks payable to Florida Department of State and mail to:

Tallahassee, Florida 32314