

N190000000625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

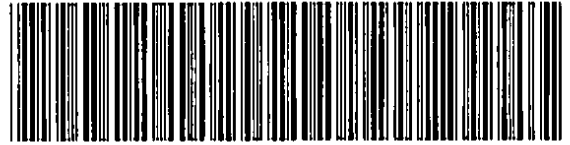
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07/19/21--01040--008 \*\*35.00

07/22/2021  
JH

FILED  
2021 JUL 14 PM 6:42  
STATE BAR OF MO  
COLUMBIA, MO



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 JUL 14 PM 12:55

June 23, 2021

HANK HOENECKE  
5820 DANIELS PARKWAY  
FORT MYERS, FL 33912 US

SUBJECT: CROWN OF LIFE LUTHERAN CHURCH INC.  
Ref. Number: N19000000625

We have received your document for CROWN OF LIFE LUTHERAN CHURCH INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to resign as officer/director for a corporation is \$35 per person resigning.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 721A00014277

RECEIVED

2021 APR 19 AM 8:05

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Crown of Life Lutheran Church Inv

(Name of Corporation)

**DOCUMENT NUMBER:** 0019019155CC

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

Please return all correspondence concerning this matter to the following:

Hank Hoenecke

(Name of Person)

Crown of Life Lutheran Church

(Name of Firm/Company)

5820 Daniels Parkway

(Address)

Fort Myers, Florida 33912

(City/State and Zip Code)

For further information concerning this matter, please call:

Ive Piper

at (239) 482-7315

(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

# OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jim Brenn, hereby resign as Treasurer  
(Title)

of Crown of Life Lutheran Church  
(Name of Corporation)

N19000000625, 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

FILED  
2021 JUL 14 PM 6:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Jim Brenn, hereby resign as Treasurer  
(Title)

of Crown of Life Lutheran Church  
(Name of Corporation)

N19000000625, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

James Brenn  
(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

FILED  
2021 JUL 14 PM 6:13  
SECRETARY OF  
TALLAHASSEE, FL