

NI9000010171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

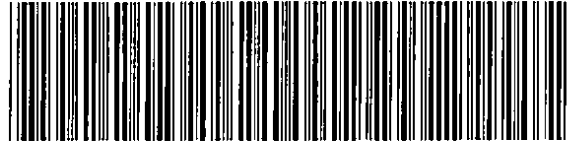
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Com 11/5

Office Use Only



800419062418

11/16/23--11017--007 •\$55.00

REC-11017-007

2023 NOV 16 AM 8:40

FILED

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Headknowles Foundation Inc.

SUBJECT: _____
(Name of Corporation)

DOCUMENT NUMBER: N19000010171

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

Please return all correspondence concerning this matter to the following:

Gina Knowles

(Name of Person)

Headknowles Foundation Inc.

(Name of Firm/Company)

16800 SW 87 Ct

(Address)

Palmetto Bay, FL 33157

(City/State and Zip Code)

For further information concerning this matter, please call:

Gina Knowles

242

805-0700

_____ at (_____) _____
(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:

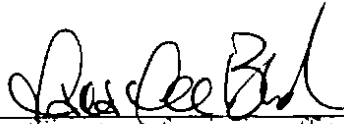
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Lana Lee-Brogdon Director and Treasurer
I, _____, hereby resign as _____
(Title)

Headknowles Foundation Inc.
of _____
(Name of Corporation)

N19000010171
_____, 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

2023 NOV 16 AM 8:40

SEC. OF STATE
TALLAHASSEE, FLORIDA