

N20000000319

11/1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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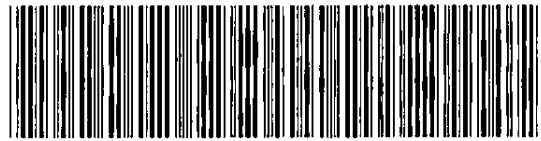
(Business Entity Name)

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TALLAHASSEE, FL

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Collective Impact Group Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** N20000000319

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

Please return all correspondence concerning this matter to the following:

Christopher Noe  
(Name of Person)

Collective Impact Group  
(Name of Firm/Company)

11924 West Forest Hill Blvd  
(Address) suite 10A - #48

Wellington, FL 33414  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Noe at (561) 843-9003  
(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, Kirsten Stevens, hereby resign as Secretary  
(Title)

of Collective Impact Group  
(Name of Corporation)

NA20000000319, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Kirsten Stevens  
(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

DEPARTMENT OF STATE  
TALLAHASSEE, FL

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