

(R	equestor's Name)
(A)	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



02/26/20--01016--019 \*\*35.00



CAM 3/13/20

## TRANSMITTAL LETTER

### TO: Amendment Section Division of Corporations

The Florida Methodist Church, Inc.

50	DJ	EC	1	•	

:

(Name of Corporation)

# DOCUMENT NUMBER: N2000001600

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

Please return all correspondence concerning this matter to the following:

James J. Therrell, Jr.

(Name of Person)

(Name of Firm/Company)

76 South Laura Street, Suite 1400

(Address)

Jacksonville, Florida

(City/State and Zip Code)

For further information concerning this matter, please call:

James J. Therrell, Jr. (Name of Person) at (904 ) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

. .

ſ.

Rinaldo D. Hernandez	, hereby resign as		
1,	, noreby resign us	(Title)	
The Florida Methodist Church, Inc.			
(N	ame of Corporation)		
N20000001600	, a corporation organized under the laws of the State of		
(Document Number, if known)			
Florida			

Restander

(Signature of resigning officer/director)

# AND FEB 26 PM 3: 40

### 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