1200000000205

(Requesto	r's Name)
(Address)	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document Number)	
Certified CopiesC	Certificates of Status
Special Instructions to Filing Officer:	
, -, -,	

Office Use Only



500431312475

06/12/24--01004--003 **35.00

223 JULY 12 FN 3: 32

TRANSMITTAL LETTER

Division of Corporations

HEART 4 HOMELESS INCORPORATED

(Name of Corporation)

DOCUMENT NUMBER: N20000006205

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

KAREN HEDEGAARD

(Name of Person)

(Name of Firm/Company)

1025 S. ORANGE BLOSSOM TRAIL

(Address)

ORLANDO, FL 32805

(City/State and Zip Code)

For further information concerning this matter, please call:

KAREN HEDEGAARD

(Name of Person)

(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:

POWERHOUSE FLORIDA INC.

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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

JOSEPHINE NGABIRANO	TREASURER	
Ι,	, hereby resign as (Title)	
HEART 4 HOMELESS INCORPORAT		
(Nar	me of Corporation)	
N20000006205 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA		
		
	Jun Minton	
	(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