

N20 0000 11534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

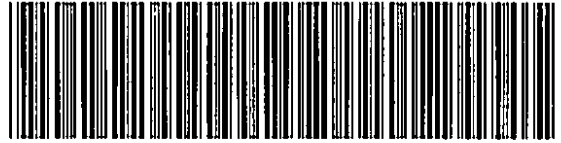
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500355801385

03/01/21--01018--013 **35.00

04/16/21

SC

RECEIVED
STATE OF CALIFORNIA

2021 MAR -1 P 2:48

FILED



TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Action Hope Foundation
(Name of Corporation)

DOCUMENT NUMBER: N2000011534

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

Please return all correspondence concerning this matter to the following:

Lindsay Rife
(Name of Person)

Action Hope Foundation
(Name of Firm/Company)

344 Providence Blvd.
(Address)

Orlando, FL 32725
(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca Schaefer at (386) 527-5643
(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, Lindsey Ruffe, hereby resign as Executive/Treasurer
(Title)

of Action Hope Foundation
(Name of Corporation)

N20000011534, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Lindsey Ruffe
(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
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2021 MAR -1 P 2:48


FILED