

N21 000 009 630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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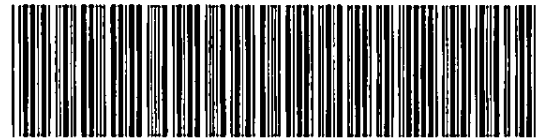
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ZIMMERMAN AND FRACITMAN LIGHT UP TH NIGHT CHARITABLE FOUNDATI

(Name of Corporation)

DOCUMENT NUMBER: N21000009630

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

Please return all correspondence concerning this matter to the following:

MINDI RUDAN

(Name of Person)

(Name of Firm/Company)

8999 HIDDEN PINE ST

(Address)

PARKLAND, FL 33067

(City/State and Zip Code)

For further information concerning this matter, please call:

MINDI RUDAN at (954) 554-9058

(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

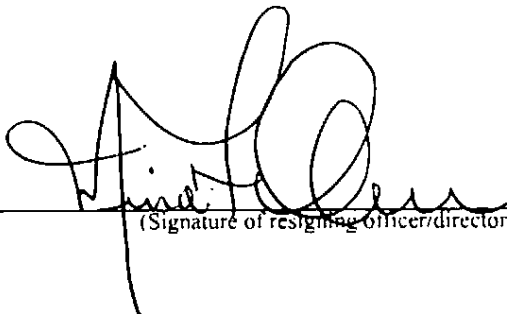
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MINDI RUDAN, hereby resign as DIRECTOR
(Title)

of ZIMMERMAN AND FRACHTMAN LIGHT UP TH NIGHT CHARITABLE FOUNDATION, INC.
(Name of Corporation)

N21000009630, 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

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TALLAHASSEE, FLORIDA