## N22819

•
(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(Boodinent Hamber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
!

Office Use Only



800292300108

11/28/16--01032--030 \*\*35.00



## TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations** Possible Dream Foundation
(Name of Corporation) N22819 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Firm/Company) For further information concerning this matter, please call: Enclosed is a check for \$35.00 made payable to the Florida Department of State. o

**Division of Corporations** P.O. Box 6327

**Mailing Address:** 

Amendment Section

Tallahassee, FL 32314

**Street Address:** 

Amendment Section **Division of Corporations** 2661 Executive Center Circle Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, haura Santa	amau'a, hereby resign as	Director (Title)
of The Possib	Le Dream France France of Corporation)	undation.
(Document Number, if known)	, a corporation organized unde	er the laws of the State of
Florida		
		16 NOV 28
	(Signature of resigning officer/director	## 8 X

## 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