## 140528

(Req	uestor's Name)	
(Add	lress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

Palm Beach Lodge No. 19, Fraternal Order of Plice Educational Assistance Fund, Inc. SUBJECT:			
(Name of Corporation)			
DOCUMENT NUMBER: N40528			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Please return all correspondence concerning this matter to the following:			
Ronald Simmons			
(Name of Person)			
(Name of Firm/Company)			
5256 Bosque Lane, Apt. 14			
(Address)			
West Palm Beach, FL 33415			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Ronald Simmons at (561) 722-8999 (Area Code & Daytime Telephone Number)			
(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
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I,</sub> Ronald Simmons	, hereby resign as Treasurer (Title)
	(Title)
Palm Beach Lodge No. 19, Fraterr	nal Order of Police Educational Assistance Fund, Inc.
	me of Corporation)
N40528 (Document Number, if known)	, a corporation organized under the laws of the State of

## FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 16 SEP - 6 AH 9: 00