14509

(Re	questor'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



200306743352

12/22/17--01003--005 **35.00

nations is a go

DEC 2 9 2017

D CUSHING

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Resignation of Officer "Trustee"
(Name of Corporation)
DOCUMENT NUMBER: N45097
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Jennifer Rathjens
(Name of Person)
Alcoholics Anonymous of Greater Miami, Inc.
(Name of Firm/Company)
4315 NW 7th St. # 36
(Address)
Miami, FL 33126
(City/State and Zip Code)
For further information concerning this matter, please call:
Jennifer Rathjens at (305) 461.2425 (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

l	Maria Zas	, hereby resign as	, hereby resign as Trustee		
			(Title)		
of	Miami				
(Name of Corporation)					
	(Document Number, if known)	a corporation organized unc	fer the laws of the State of		
	N45097				

Maria Zas

Digitally signed by Maria Zas Date: 2017.11.15 14:13:24 -05'00'

(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 17 DEC 22 PM 2: 44