N49618

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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12/30/13--01040--009 **35.00

13 DEC 30 PM 2: 43
SECRETARY OF STATE

Old Resignation

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, GABRIELA RAMIREZ	, hereby resign as DIRECTOR
	(Title)
of IGLESIA CRISTO LA UNICA	
(Name of Corporation	n) .
N49618 (Document Number, if known), a corporation of the corporation	ation organized under the laws of the State of
FLORIDA	

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

TRANSMITTAL LETTER

IGLESIA CRISTO LA UNICA ESPERANZA A.D. INC. (Name of Corporation) DOCUMENT NUMBER: N49618 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: GABRIELA RAMIREZ (Name of Person) (Name of Firm/Company) 2301 LUCAYA LANE J1 (Address) COCONUT CREEK, FL 33066 (City/State and Zip Code) For further information concerning this matter, please call: **GABRIELA RAMIREZ** Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address:
Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Amendment Section Division of Corporations