N95000005607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TO: Amendment Section
Division of Corporations

SUBJECT: Community Inclusion Enterprises, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N95000005607

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

Please return all correspondence concerning this matter to the following:

~~Kimberly Hayward~~ Donna Taylor
(Name of Person)

Community Inclusion Enterprises, Inc.
(Name of Firm/Company)

8330 Allan Blvd.
(Address)

Punta Gorda, Fl. 33982
(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly Hayward at (941) 626-1410
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for $35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

FILED
10 MAR 10 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Kimberly Hayward, hereby resign as Director (Title)

of Community Inclusion Enterprises, Inc. (Name of Corporation),

N95000005607 (Document Number, if known), a corporation organized under the laws of the State of Florida.

Kimberly Hayward
(Signature of resigning officer/director)

I asked miss Tayla to Remove my name in July of 2009, when she asked me to be Director I had when I found out. so I did it would be put on corporation, I would have never agreed to that. I also saw she has my address wrong.

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