N97000018/7

(Requestor's Name)						
(Ad	dress)					
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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Of Bus Resign

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Unity Christian Felloushup Munustry, Inc. (Name of Corporation) DOCUMENT NUMBER: M9700000 1817
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tabitha Williams (Name of Person)
(Name of Firm/Company)
2223 Mescalan Way (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tabitha Williams at (904) 343-326/ (Name of Person) at (904) 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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



 I,	Tabitha	Williams	, hereby re	esign as <u>Director</u> (Title)	(e)
of	Unity	Christian	Fellowship of Corporation)	Ministry, Inc.	,
M	970000 (Document Nu	1817 mber, if known)	, a corporation orga	nized under the laws of the St	ate of
Ŧ	Torida				

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