

PO1000110570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

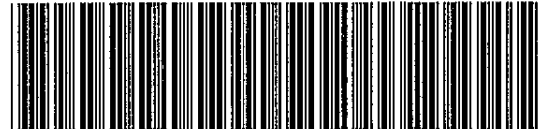
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800064857938

01/31/06--01040--025 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JAN 31 PM 2:14

PS 2/3/02
P/D. C. S.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Empowerment Partnership, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PD1000110570

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

Please return all correspondence concerning this matter to the following:

David W. Southwell

(Name of Person)

Creative Asset Protection Strategies, Inc.

(Name of Firm/Company)

16191 NW 57th Avenue

(Address)

Miami, FL 33014

(City/State and Zip Code)

For further information concerning this matter, please call:

David Southwell

(Name of Person)

at (305) 621-0220

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

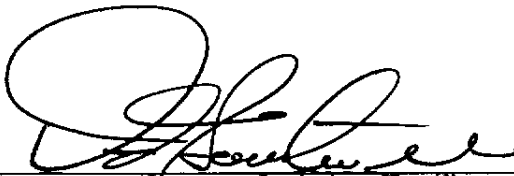
06 JAN 31 PM 2:14

I, David W. Southwell, hereby resign as Executive Director
(Title)

of The Empowerment Partnership, Inc.
(Name of Corporation)

PO1000110570, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(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