

PO3000085855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

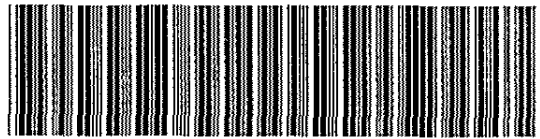
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

officer Resignation  
Cg  
6-18-04

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Kay's Helping Hand, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** PO3000085855

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

Please return all correspondence concerning this matter to the following:

Kim Davidson  
(Name of Person)

Kay's Helping Hand, Inc.  
(Name of Firm/Company)

505 1485 7TH AVE  
(Address)

VERO BEACH FL 32962  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly Council at (772) 564-6758  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399


**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Kim Davidson, hereby resign as PRESIDENT & SECRETARY  
(Title)

of Kay's Helping Hand, INC  
(Name of Corporation)

P03000085855, 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

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