## P03 000 100900

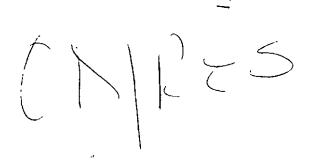
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



900357453499

01/11/21--01019--019 \*\*85.80



FEB 1 8 2021 I ALBRITTON

## TRANSMITTAL LETTER

Division of Corporations	
New Image Ventures, Inc	
	(Name of Corporation)
DOCUMENT NUMBER: P03000100900	
The enclosed Officer/Director Resignatio	n for a Corporation and fee are submitted for filing
Please return all correspondence concerni	ing this matter to the following:
Andrew Weber	
(Name of Person)	
New Image Ventures, Inc	
(Name of Firm/Company	y)
150 S Simpson St	
(Address)	
Mount Dora, FL 32757	
(City/State and Zip Code	<del>e)</del>
For further information concerning this m	natter, please call:
Andrew Weber	at (352 383-7368 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made paya	able to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Philip Christopher Spence	Vice Director , hereby resign as	
11	(Title)	
New Image Ventures, Inc.		
of (Nam	e of Corporation)	
P03000100900	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
	<del>_</del> '	
	1	
	·~	
$0^{3}$		
	Signature of resigning officer/director)	
	· · · · · · · · · · · · · · · · · · ·	
	ਾ <u></u>	

## 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