

PO7000028555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2008 MAR 28 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation

TB

4-2-18

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADL Lending a Hand Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Anne Barlatier
(Name of Person)

ADL Lending A Hand
(Name of Firm/Company)

6206 NW Gex Ct.
(Address)

Pt. St. Lucie, FL 34986
(City/State and Zip Code)

For further information concerning this matter, please call:

Anne Barlatier at (772) 985-1953
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2008 MAR 28 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Anne Barlatier, hereby resign as Director
(Title)

of ADL Lending A Hand Inc.
(Name of Corporation)

707000028555, a corporation organized under the laws of the State of
(Document Number, if known)

Anne Barlatier
(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