

P09D000063119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

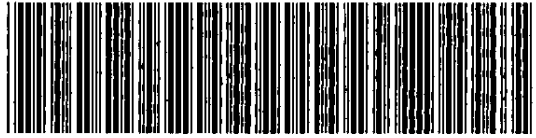
(Business Entity Name)

(Document Number)

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@ 4.12.10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Lighthouse Beacon, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P09000063119

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

Please return all correspondence concerning this matter to the following:

Christopher K. Hawley

(Name of Person)

The Lighthouse Beacon, Inc.

(Name of Firm/Company)

12995 NE 7th Avenue

(Address)

North Miami, Florida 33161

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher K. Hawley

(Name of Person)

at (786) 360-1627

(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

10 APR 12 AM 9:46
STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

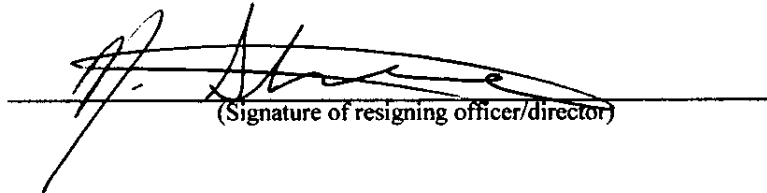
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Michele M. Steegstra, hereby resign as Treasurer
(Title)

of The Lighthouse Beacon, Inc.
(Name of Corporation)

P09000063119, 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

10 APR 12 AM 9:46
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE