P09000095345

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	ne) ,
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Joseph's Journey Corporation (Name of Corporation)
DOCUMENT NUMBER: P09000095245
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Donds (Name of Person)
Joseph's Journey Corporation (Name of Firm/Company)
P.O. Box 1543 (Address)
San Bruno, CA 94066 (City/State and Zip Code)
For further information concerning this matter, please call:
Jerome C. Ferreras at (321) 305 - 3827 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Josephis	Towney Corporation (Name of Corporation)
09 0000 9 5 2 4 5 (Document Number, if known	, a corporation organized under the laws of the state of
Florida	 -

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SECRETARY OF SECTION

