

P95000050809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Mcc Incorporated  
(Name of Corporation)

DOCUMENT NUMBER: P95000050809

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 Rufiange  
(Name of Person)

Families In Recovery  
(Name of Firm/Company)

282 Short Ave #116  
(Address)

Longwood, FL 32750  
(City/State and Zip Code)

Mailing  
PO BOX  
520 923  
Longwood,  
32750

For further information concerning this matter, please call:

Anne Rufiange at ( 407 ) 260 1165  
(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  
05 NOV 17 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Anne Reu Rufange, hereby resign as President  
(Title)

of MCC Incorporated  
(Name of Corporation)

P95000050809, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Anne Reu Rufange  
(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