

N16 00000 2264

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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DIVISION OF CORPORATE AFFAIRS
FILING

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Haitian American Nursing Organization & Alliances Inc.
(Name of Corporation)

DOCUMENT NUMBER: N16000002264

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

Please return all correspondence concerning this matter to the following:

Yves Labady
(Name of Person)

HANOA
(Name of Firm/Company)

110 Tuscany Drive
(Address)

ROYAL PALM BEACH, FL 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

Yves Labady at (561) 792-3702
(Name of Person) (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
P.O. Box 6327
Tallahassee, FL 32314

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, CAROL ALTA V. PIERRE, hereby resign as PRESIDENT
(Title)

of HAITIAN AMERICAN NURSING ORGANIZATION & ALLIANCES INC.
(Name of Corporation)

N16000002264, 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

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CORPORATION DIVISION OF FLORIDA
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