P000000 49133

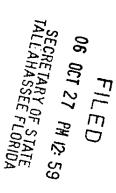
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: A&L Healthcare Corp.	
	(Name of Corporation)
DOCUMENT NUMBER: P0000	0049133
The enclosed Officer/Director Resigna	ation for a Corporation and fee are submitted for filing.
Please return all correspondence conce	erning this matter to the following:
Sandra Riley	
(Name of Person)
A&L Healthcare Corp.	•
(Name of Firm/Comp	pany)
11764 N.W. 30th Street	
(Address)	
Coral Springs, Florida 33065-415	2
(City/State and Zip C	Code)
For further information concerning thi	s matter, please call:
Sandra Riley	at (954) 536-3701 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made p	payable to the Florida Department of State.
Amendment Section Division of Corporations Clifton Building	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Fallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Antonette Russell	hereby resign as	Vice President and Director			
	, nereby resign as	((Title)		
ofA&L Healthcare Corp.					_,
(Nam	ne of Corporation)				
P0000049133 (Document Number, if known)	, a corporation organized under the laws of the State of				
Florida					
	 -				
	(Signature of resigning officer/direct	etor)			
			SECRETAT TALL:AHAS	06 OCT 2	FILE
	FILING FEE IS \$35.00		RY OF S	27 PM I	ED.

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

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