P16000047967

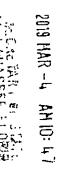
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TRANSMITTAL LETTER

TRANSMITTAL LETTER		
TRANSMITTAL LETTER TO: Amendment Section Division of Corporations SUBJECT: Horeb Health Clinic, Inc. (Name of Corporation) P16000047967		
SUBJECT: Horeb Health Clinic, Inc. (Name of Corporation)		
DOCUMENT NUMBER: P16000047967		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Weedny Andre		
(Name of Person)		
(Name of Firm/Company)		
7010 Tyler St		
(Address)		
Hollywood, FL 33024		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Weedny Andre (Name of Person) at (305) 967-9764 (Area Code & Daytime Telephone Number)		

Mailing Address:

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

Street Address:

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Weedny Andre	Vice President, Co-owner, hereby resign as
	(Title)
of_Horeb Health Clinic	, Inc.
	f Corporation)
P1000047967 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	2019 HAR -4
	gnature 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