

NO300004251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

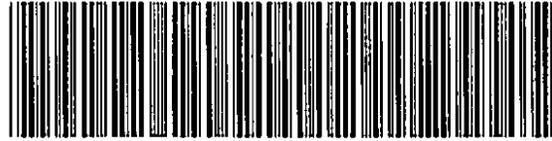
(Business Entity Name)

(Document Number)

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C. GOLDEN

NOV 21 2017

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A Mother's Care Inc.
(Name of Corporation)

DOCUMENT NUMBER: N0300000

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Brenda Stevens
(Name of Person)

(Name of Firm/Company)

15726 NW 7th Avenue, Unit H
(Address)

Miami, FL 33169
(City/State and Zip Code)

For further information concerning this matter, please call:

Brenda Stevens at () 786-439-7876
(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, Brenda Stevens, hereby resign as officer
(Title)

of A Mother's Care, Inc.
(Name of Corporation)

N03000006251, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Brenda Stevens
(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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