## N09000004443

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:_ANGEL HANDS FOR	R ALS FOUNDATION, CORP.
SUBJECT	(Name of Corporation)
DOCUMENT NUMBER: N090	00004663
The enclosed Officer/Director Resign	nation for a Corporation and fee are submitted for filing
Please return all correspondence con	cerning this matter to the following:
LESTER G. KATES, ESQ.	
(Name of Perso	on)
LAW OFFICES OF LESTER G.	KATES, P.A.
(Name of Firm/Con	npany)
2655 LeJeune Road, Suite 804	,
(Address)	
Coral Gables, Florida 33134	
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
LESTER G. KATES, ESQ.	at ( 305 ) 445 4506 (Area Code & Daytime Telephone Number)
(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	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	ESPERANZA FRANKY	, hereby resign as	Officer/Director
			(Title)
		•	
of	ANGEL HANDS for ALS		
	(Nan	ne of Corporation)	
	N09000004663	, a corporation organized unde	r 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

SECRETARY OF STAILS TALLAHASSEE, FLORIDA 109 SEP -8 PH 3: 57