

N 11000004819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

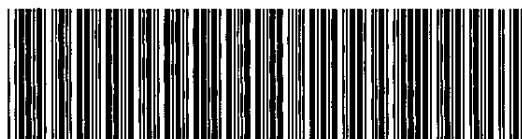
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/12/12--01018--018 **25.00

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FILED
12 DEC -3 PM 3:56
FBI - NEW YORK

O/D Resign.

12-4-12

DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2012

ONELIA FAJARDO-GARCIA
ALLIANCES FOR A BETTER LIFE, CORP.
8770 SUNSET DR. #454
MIAMI, FL 33173

SUBJECT: ALLIANCES FOR A BETTER LIFE, CORP.
Ref. Number: N11000004819

We have received your document for ALLIANCES FOR A BETTER LIFE, CORP. and check(s) totaling \$25.00. However, your check(s) and document are being returned for the following:

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 312A00025569

RECEIVED
12 DEC -3 AM 9:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Alliances for A Better Life
(Name of Corporation)

DOCUMENT NUMBER: 45-2456468

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

Please return all correspondence concerning this matter to the following:

Boris Alvarez
(Name of Person)

Alliances for A Better Life Corp
(Name of Firm/Company)

8770 Sonset Dr SW
(Address)

Miami FL 33173
(City/State and Zip Code)

For further information concerning this matter, please call:

Ornelia Castaneda at (305) 726 1653
(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
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Boris Alvarez, hereby resign as Director
(Title)

of Pharmacia for a better life corp.
(Name of Corporation)

452456468
(Document Number, if known), a corporation organized under the laws of the State of
Florida

[Signature]
(Signature of resigning officer/director)

RECEIVED
DEC 3 1993

12 DEC -3 PM 3:56

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