# N12000007164

(Rec	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	//State/Zip/Phone	e #)	
PICK-UP		MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



02/03/17--01011--001 \*\*35.00



FEB 0 6 2017 C MCNAIR LAW OFFICES **RYAN & RYAN, LLC** THIRD FLOOR 700 EAST DANIA BEACH BOULEVARD DANIA BEACH, FLORIDA 33004-3090

ARCHIE J. RYAN, III TIMOTHY M. RYAN CHRISTOPHER J. RYAN\* ERIC W. ABEND \*Board Certified City, County and Local Government Lawyer

TELEPHONE: (954) 920-2921 FACSIMILE: (954) 921-1247 www.ryanlawfl.com

February 2, 2017

#### VIA FEDERAL EXPRESS

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

> Re: Pembroke Park Cares, Inc. Document No.: N12000007164 Our File Number: 22598E

Greetings:

į.

Enclosed please find the transmittal letter and Officer/Director Resignation for a Corporation for Georgina Cohen for her resignation from the office of Director for Pembroke Park Cares, Inc. Enclosed also please find Ryan & Ryan Trust Account Check #22819 in the amount of \$35.00 in payment of the filing fee for this amendment.

Kindly return evidence of the processing of the amendment to the undersigned in the enclosed self-addressed, stamped envelope. Thank you for your assistance in this matter.

ery truly ours. CHRISTOPHER J. RYAN

CJR/aja Encl.

cc: Town of Pembroke Park

L'Anilia/Chris/Town of Pembroke Park/Letter to Division of Corporations wpd



#### TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

## SUBJECT: Pembroke Park Cares, Inc.

(Name of Corporation)

#### DOCUMENT NUMBER: N12000007164

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

Please return all correspondence concerning this matter to the following:

#### Christopher Ryan

(Name of Person)

## Ryan & Ryan, LLC

(Name of Firm/Company)

#### 700 East Dania Beach Blvd

(Address)

## Dania Beach, FL 33004

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Ryan	<sub>at (</sub> 954	,920-2921
(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





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