N130000004424

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



600257363846

03/05/14--01013--024 **35.00

SECRETARY OF STATE

C. LEWIS

MAR - 6 2014

EXAMINER

TRANSMITTAL LETTER

Division of Corporations

SUBJECT: House of Healing Hearts Inc
(Name of Corporation)

DOCUMENT NUMBER: N13000004424

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

Karen E Riecks
(Name of Person)

(Name of Firm/Company)

9141 Heathridge Drive
(Address)

West Palm Beach, FL 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

Karen E Riecks

at 561 784-2348

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

(Name of Person)

Amendment Section

TO:

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

APPROVEL AND FILED

14 MAR .- 5 PM 1: 51

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Karen E Riecks	, hereby resign as Vice President
	(Title)
House of Healing He	
,	Corporation)
	a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	·
	,
Karen &	Richer
(Sign	ature 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