

N140000000378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

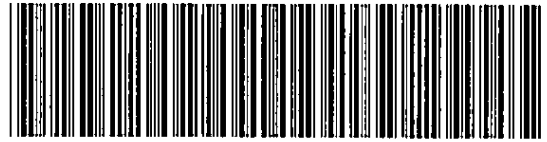
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Home-Call Healthcare Corp.

(Name of Corporation)

DOCUMENT NUMBER: N14000000378

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

Please return all correspondence concerning this matter to the following:

Jim Farah

(Name of Person)

Farah Law

(Name of Firm/Company)

6550 St. Augustine Road, #103

(Address)

Jacksonville, Florida 32217

(City/State and Zip Code)

For further information concerning this matter, please call:

Jim Farah

(Name of Person)

at (**904**) **443-0060**

(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, Ailene E. Parnell, hereby resign as Director
(Title)

of Home-Call Healthcare Corp.
(Name of Corporation)

N14000000378
(Document Number, if known), a corporation organized under the laws of the State of
Florida

Ailene E. Parnell
(Signature of resigning officer/director)

2019 APR 26 PM 4:26

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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