

N1700000 2689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

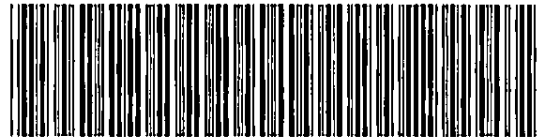
(Business Entity Name)

(Document Number)

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S TALLENT

SEP 12 2019

*Old Resign*

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2019 AUG 29 AM 8:18  
SEC. OF STATE  
TOLSON

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Farrell Cares, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** N17000002689

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

Please return all correspondence concerning this matter to the following:

Tina Farrell  
(Name of Person)

Farrell Cares, Inc.  
(Name of Firm/Company)

P.O. Box 776  
(Address)

Port Richey, Fl 34673  
(City/State and Zip Code)

For further information concerning this matter, please call:

Tina Farrell at ( 727 ) 845-7763  
(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

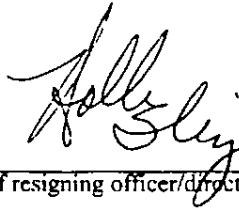
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Holly Sliz, hereby resign as Director  
(Title)

of Farrell Cares, Inc.  
(Name of Corporation)

N17000002689, a corporation organized under 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

2019 AUG 29 AM 8:18  
SECRET  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS

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