

PD1000083763

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(Business Entity Name)

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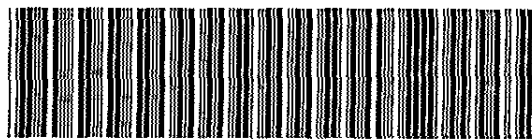
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: G. ALFA SERVICES Corp. / ALFA HEALTH CARE NATIONAL ASSOCIATION
(Name of Corporation)

DOCUMENT NUMBER: P01000083763

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

Please return all correspondence concerning this matter to the following:

PAULA A. Londono
(Name of Person)

G. ALFA SERVICES Corp. / ALFA Health Care N. A.
(Name of Firm/Company)

1171 NW 15 AVE # 212
(Address)

BOCATON, FL 33486
(City/State and Zip Code)

For further information concerning this matter, please call:

Paula A. Londono at (561) 368-9678
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Paula A. Londono, hereby resign as VICE - President
(Title)

of G-Alfa services corp.
(Name of Corporation)

PO1000083763, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Paula A. Londono
(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

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