

P04000/68208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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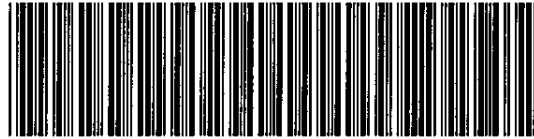
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AXB HOME HEALTHY INC
(Name of Corporation)

DOCUMENT NUMBER: PD4000168208

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

Please return all correspondence concerning this matter to the following:

Gilbert Rivera
(Name of Person)

AXB Home Healthy Inc
(Name of Firm/Company)

81867 NW Palm Court Apt 1205
(Address)

PHM LAKE FC 32137
(City/State and Zip Code)

For further information concerning this matter, please call:

Gilbert Rivera at (386) 447 8413
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2551 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JO ANN RIVERA, hereby resign as PRESIDENT
(Title)

of A & B HOME READY, INC,
(Name of Corporation)

P04000168208, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

[Signature]
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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