

P04000172453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

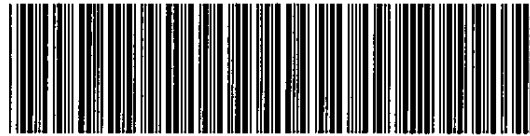
(Business Entity Name)

(Document Number)

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07 SEP 17 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resign

C. Coutlette SEP 19 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SILVER SHOES HEALTHY, INC.
(Name of Corporation)

DOCUMENT NUMBER: PD4000172453

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

Please return all correspondence concerning this matter to the following:

GARY DELUCA
(Name of Person)

SILVER SHOES HEALTHY, INC.
(Name of Firm/Company)

3303 NE 32nd St.
(Address)

FT. LAUDERDALE, FL 33308
(City/State and Zip Code)

For further information concerning this matter, please call:

GARY DELUCA at (954) 794-1900
(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
2661 Executive Center Circle
Tallahassee, FL 32301

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

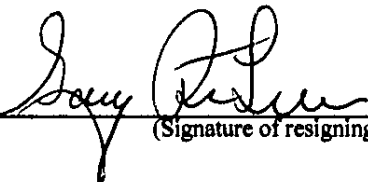
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GARY DELUCA, hereby resign as DIRECTOR
(Title)

of SILVER SHORES HEALTH, INC
(Name of Corporation)

PD4000172453, 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

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