P05000026339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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AUG 10 2012

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IN JOY HEALTHCARE INC
(Name of Corporation)

DOCUMENT NUMBER: P05000026339

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

Please return all correspondence concerning this matter to the following:

Samadhi Keever
(Name of Person)

IN JOY HEALTH CARE
(Name of Firm/Company)

~~50~~ P.O. BOX 3314
(Address)

WINTER PARK, FL 32790
(City/State and Zip Code)

For further information concerning this matter, please call:

Samadhi Keever at (407) 252-1397
(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

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jeffrey Miles Keever, hereby resign as Director (Title)

of IN JOY HEALTHCARE, INC. (Name of Corporation),

P05000026339 (Document Number, if known), a corporation organized under the laws of the State of Florida.

Jeffrey Miles Keever
(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