

P050000P3051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

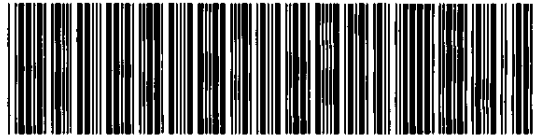
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FILED
09 JUN 18 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T Roberts JUN 18 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2009

ROCIO ECHEVERRIA
MAM HOME HEALTH CARE
199 S W 12 AVE STE #4
MIAMI, FL 33130

SUBJECT: MAM HEALTH ENTERPRISES, INC.
Ref. Number: P05000083051

We have received your document for MAM HEALTH ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 509A00019585

RECEIVED
2009 JUN 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAM HOME Health CARE
(Name of Corporation)

DOCUMENT NUMBER: POB000083051

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

Please return all correspondence concerning this matter to the following:

Rocio Echeverria
(Name of Person)

MAM HOME Health CARE
(Name of Firm/Company)

199 SW 12 Ave SUITE #4
(Address)

MIAMI, FL 33130
(City/State and Zip Code)

For further information concerning this matter, please call:

Rocio Echeverria at (305) 934-5478
(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**


FILED
09 JUN 18 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Rocio Echeverria, hereby resign as Secretary
(Title)

of MAM HEALTH ENTERPRISES, INC.
(Name of Corporation)

P05000083051, 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