

P05000143163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

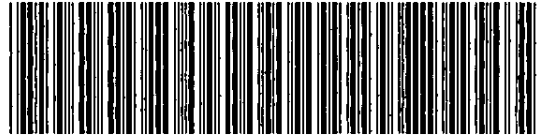
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JUL -2 AM 10:24

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TIME IS CARE II CORP.

(Name of Corporation)

DOCUMENT NUMBER: P05000143163

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

Please return all correspondence concerning this matter to the following:

Efraim R. Gutierrez, Esq.

(Name of Person)

Law Offices of Efraim R. Gutierrez, P.A.

(Name of Firm/Company)

2200 S. Dixie Hwy., Ste. 702-A

(Address)

Miami, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Efraim R. Gutierrez, Esq.

(Name of Person)

at (305) 856-7780

(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**

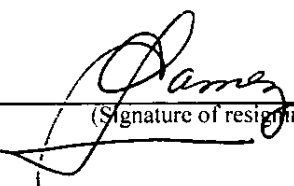
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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Onilda Gamez, hereby resign as Director, President,
Secretary and Treasurer (Title)
of TIME IS CARE II CORP.
(Name of Corporation)

P05000143163, 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