

P06000022645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

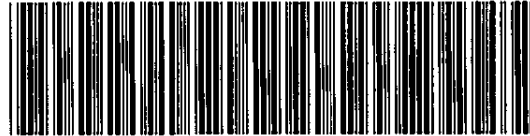
(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:



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12/23/14--01007--003 **35.00

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TALLAHASSEE, FL

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Old Resignation

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Home w/ Guiding Hands, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000022645

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

Please return all correspondence concerning this matter to the following:

Maria C. Ancona
(Name of Person)

The Home w/ Guiding Hands, Inc
(Name of Firm/Company)

1256 N. Florida Ave
(Address)

Tarpon Springs, FL 34689
(City/State and Zip Code)

For further information concerning this matter, please call:

Maria Ancona at (727) 409-0184
(Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

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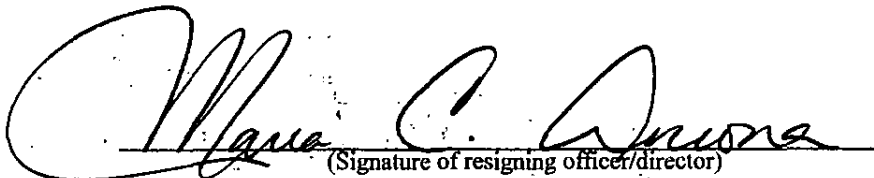
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Maria C. Ancona, hereby resign as Vice-President
(Title)

of The Home w/ Guiding Hands, Inc.
(Name of Corporation)

PO6000022645, 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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA