

# PO6000034773

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6380

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From:

Account Name : JORGE L. FORS, P.A.  
Account Number : I20000000261  
Phone : (305)448-5977  
Fax Number : (305)446-1898

JUL 16 2015

R. WHITE

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@forslegal.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
QUALITY LIFE HOME CARE CORP.**

Certificate of Status	0
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Quality Life Home Care Corp.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000054773

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

Please return all correspondence concerning this matter to the following:

Isolda Saldarriaga

(Name of Person)

Quality Life Home Care Corp.

(Name of Firm/Company)

11448 W. Okeechobee Rd.

(Address)

Hialeah Gardens, FL 33018

(City/State and Zip Code)

For further information concerning this matter, please call:

Isolda Saldarriaga

(Name of Person)

at ( 786 ) 277-6937

(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**

15 JUL 15 10 34 AM  
TALLAHASSEE, FLORIDA

I, Isolda Saldarriaga, hereby resign as Vice President & Director  
(Title)

of Quality Life Home Care Corp.  
(Name of Corporation)

P06000054773

(Document Number, if known)

, a corporation organized under the laws of the State of  
Florida

Isolda Saldarriaga  
Digitally signed by Isolda Saldarriaga  
DN: cn=Isolda Saldarriaga, o=Quality Life Home Care Corp.,  
ou, email=msrego@forlegal.com, c=US  
Date: 2015.07.15 09:35:34 -0400  
(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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