

PD6 0000 82004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

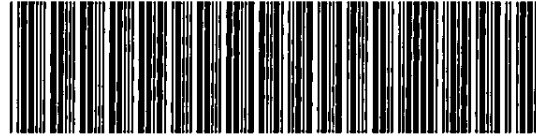
(Business Entity Name)

(Document Number)

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06 SEP 25 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Emmanuel Home Health Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000082004

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

Please return all correspondence concerning this matter to the following:

Mercedes Preciado

(Name of Person)

Emmanuel Home Health Inc.

(Name of Firm/Company)

1900 West Commercial Blvd. Suite 22

(Address)

Hollywood, FL. 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

Mercedes Preciado

(Name of Person)

at (786) 486-0158

(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**

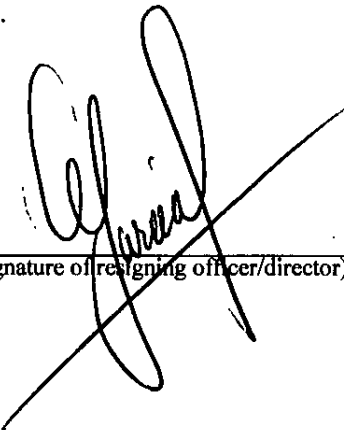
FILED
06 SEP 25 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Osvaldo J. Garcia, hereby resign as President
(Title)

of Emmanuel Home Health Inc.
(Name of Corporation)

P06000082004, 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