

P07000071595

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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COR AMND/RESTATE/CORRECT OR O/D RESIGN

BRIDGEPORT HOME HEALTH CARE/PRIVATE, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jeff Baker, hereby resign as President, Secretary, Sole Director
(Title)

of Bridgeport Home Health Care Private, Inc.
(Name of Corporation)

PG70000971595 _____ a corporation organized under the laws of the State of
(Document Number, if known)
Florida

(Signature of religious officer/director)

FILED 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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