## P08000065402

(Re	questor's Name)	
(Ad	dress)	<del> </del>
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(Cit	y/State/Zip/Phone	e #)
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**C.COULLIETTE** 

JUN 03 2011

**EXAMINER** 

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

OLIALITY CARE IANITORIAL INC
SUBJECT: QUALITY CARE JANITORIAL INC (Name of Corporation)
DOCUMENT NUMBER: P08000065402
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
NELSON MUNIZ
(Name of Person)
QUALITY CARE JANITORIAL INC
(Name of Firm/Company)
8328 SW 103 AVE
(Address)
MIAMI, FL 33173
(City/State and Zip Code)
For further information concerning this matter, please call:
NELSON MUNIZ  (Name of Person)  at (786) 597-1190  (Area Code & Daytime Telephone Number)
(Name of Person) (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

I, YDAVILMA QUIALA	, hereby resign as VP
15	, hereby resign as(Title)
of QUALITY CARE JANITORIAL	INC
(Name	of Corporation)
P08000065402 (Document Number, if known)	_, a corporation organized under the laws of the State of
FL	<b>_</b> ·
	a ·

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314