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R. WHITE

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT. GENESIS FUNERAL HOME AND \$495 CREMATION CENTER INC.

(Name of Corporation)

DOCUMENT NUMBER: P08000105573

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

Please return all correspondence concerning this matter to the following:

DARRYL S. SCHREIBER, ESQ.

(Name of Person)

SCHREIBER, SCHREIBER & SCHREIBER, P.A.

(Name of Firm/Company)

5600 SHERIDAN STREET

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

DARRYL S. SCHREIBER 1, 954 , 966-5600

(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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I,</sub> RUBEN A. VARGAS	
GENESIS FUNERAL HOM	(Title)  1E AND \$495 CREMATION CENTER INC.
	f Corporation)
P08000105573 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	
<u> Liber</u>	ignature of resigning officer/director)
	SECR.
	E S

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