P10000033918

(Requestor's Name)
(Address)
(Address)
(Ch. (Ch.) - (Tin (Ch.)) - 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
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COVER LETTER

SUBJECT: Roadcare Plus Corpo	pration
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P1000	00033918
The enclosed Officer/Director Resign	nation for a Corporation and fee are submitted for filing.
Please return all correspondence cond	cerning this matter to the following:
Stanley Tepper	
(Name of Perso	n)
c/o Business Management Prod	luction Service Cons
(Name of Firm/Con	npany)
244 5th Avenue	
(Address)	
New York , New York 10001	
(City/State and Zip	Code)
For further information concerning th	nis matter, please call:
Stanley Tepper	at (212) 802 8072 (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. Exclused From Stanley TEREL. CRIP 2017 \$35
Street Address: Amendment Section	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Stanley Tepper	, hereby resign as CFO
	(Title)
ofRoadcare Plus Corporation	
(Nar	ne of Corporation)
P10000033918	, a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	
	27
	THE TO
	(Signature of resigning officer/director) Showley TEPPER

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