

P10000052707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400278290314

10/22/15--01008--008 **35.00

15 OCT 22 AM 10:18
CLERK OF COURT
TALLAHASSEE, FL 32301

UDO PES.

OCT 26 2015

R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **ST. RBAKAH PHARMACY INC.**

(Name of Corporation)

DOCUMENT NUMBER: **P10000052707**

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

Please return all correspondence concerning this matter to the following:

JACOB BOTROS

(Name of Person)

(Name of Firm/Company)

1431 ORANGE CAMP RD STE 102

(Address)

DELAND, FL 32724

(City/State and Zip Code)

For further information concerning this matter, please call:

MAGDY FAM

(Name of Person)

at

386 672-0600

(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

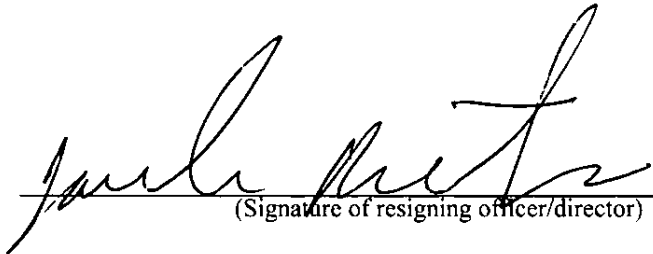
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JACOB BOTROS, hereby resign as PRESIDENT
(Title)

of ST. RBAKAH PHARMACY INC.
(Name of Corporation)

P10000052707, 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

15 OCT 22 AM 10:18
TALLAHASSEE, FLA.