

P12000571961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

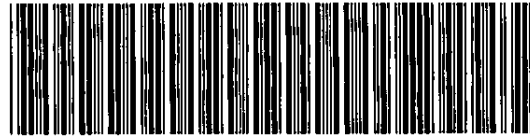
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200252545562

10/15/13--01058--007 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 15 PM 3:32

FILED

DIDRES

OCT 21 2013

R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tranquility Healthcare Solutions, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P12000071961

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

Please return all correspondence concerning this matter to the following:

Christina Benson

(Name of Person)

Tranquility Healthcare Solutions, Inc.

(Name of Firm/Company)

1818 Martin Luther King Jr Blvd # 170

(Address)

Chapel Hill, NC 27514

(City/State and Zip Code)

For further information concerning this matter, please call:

Christina Benson at (919) 599-7171

(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**

I, Sheldon L. Wilson, hereby resign as CEO
(Title)

of Tranquility Healthcare Solutions, Inc.
(Name of Corporation)

P12000071961, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILED
OCT 15 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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