

P12000090829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

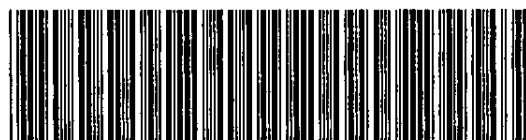
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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10/23/13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Health Alliance Group INC
(Name of Corporation)

DOCUMENT NUMBER: P12000090829

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

Please return all correspondence concerning this matter to the following:

Corey S. Shader
(Name of Person)

Health Alliance Group INC
(Name of Firm/Company)

800 Jeffrey ST #407
(Address)

BOCA RATON FL 33489
(City/State and Zip Code)

For further information concerning this matter, please call:

Andrew Shader at (954) 214 6441
(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
409 E. Gaines Street
Tallahassee, FL 32399

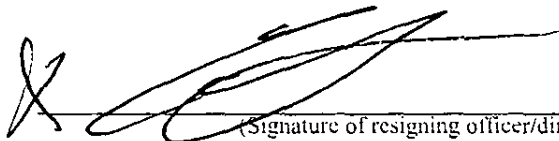
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Corey S. Shadler, hereby resign as President
(Title)

of Health Alliance ~~Group~~ Group INC
(Name of Corporation)

P12000090829, 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

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DIVISION OF CORPORATIONS
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