

P13000052987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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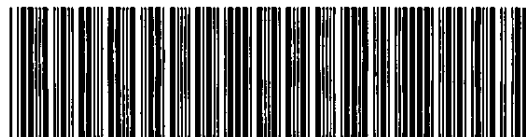
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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DEC 26 2013

EXAMINER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALWAYS THERE IN-HOME CARE INC
(Name of Corporation)

DOCUMENT NUMBER: P13000052987

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

Please return all correspondence concerning this matter to the following:

TANYA JOPSON
(Name of Person)

ALWAYS THERE IN-HOME CARE INC
(Name of Firm/Company)

4001 BENEVA RD #401
(Address)

SARASOTA FL 34233
(City/State and Zip Code)

For further information concerning this matter, please call:

TANYA JOPSON at (941) 822-4278
(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, TANYA JOPSON, hereby resign as VP (Title)

of ALWAYS THERE IN-HOME CARE INC.
(Name of Corporation)

P13000052987, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Tanya Jopson
(Signature of resigning officer/director)

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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