P13000090735

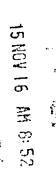
(Re	equestor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						





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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: BOOMERS WORK EMPLOYMENT SERVICES, INC. (Name of Corporation)
DOCUMENT NUMBER: P13000090735
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: ImoTHY HEARON (Name of Person)
(Name of Ferson) (Name of Firm/Company)
5164 WINDWARD Are. (Address)
SARASOTA, FL 34242 (City/State and Zip Code)
For further information concerning this matter, please call:
Inorthy HEARON at (970) 819-9908 (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

TO:

Amendment Section

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, TIMOTHY HEARON		, hereby resign as_	PRESIDENT	(Title)
of BoomERPWORK	Emplorment	SERVICES	INC.	,
P1300009073	, a corpora			the State of
FLORIDA	·			
				15 NOV 16
		esigning officer/direc		

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