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TRANSMITTAL LETTER

Division of Corporations SUBJECT: Avian Home Health Corporation (Name of Corporation) DOCUMENT NUMBER: P13000102306 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Orlando Perez Horta (Name of Person) Avian Home Health Corporation (Name of Firm/Company) 8910 N Dale Mabry Hwy STE 27 (Address) Tampa, FL 33614 (City/State and Zip Code) For further information concerning this matter, please call: Orlando Perez Horta (Name of Person)

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

Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L Miguel A Del Valle	. hereby resign as Vice President	
	(Title)	
of Avian Home Health Corporation		
(Name	of Corporation)	
P13000102306 (Document Number, if known)	, a corporation organized under the laws of the State of	
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