P14000014867

(Requestor's Name)					
(Address)					
(Add	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
# 35	.00 usa				

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JAMES AS CONTRACT

FEB 2 2 2017 C LEWIS



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2017

SARAH KELAVA / HEALING HOOVES PSYCHOTHERAPY INC 1159 SE 6TH COURT DANIA BEACH, FL 33004 US

SUBJECT: HEALING HOOVES PSYCHOTHERAPY INC.

Ref. Number: P14000014867

We have received your document for HEALING HOOVES PSYCHOTHERAPY INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You filled out the wrong form to resign as officer. Nikola kelava has never been the registered agent of this company.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 917A00001314

Carolyn Lewis Regulatory Specialist II

www.sunbiz.org

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	Healing	Horres	Poucho	Hugan Inc
DOCUMENT NO	JMBER: P14000	(Name of C	orporat(on)	4.2

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

Please return all correspondence concerning this matter to the following:

Sarah Kelenja (Name of Person)
(Name of Person)
Healing Howen Popular Verpy
(Name of Firm/Company)
1159 SE Cota Court (Address)
(Address)
City/State and Zip Code)

For further information concerning this matter, please call:

Sarah Kelawa at (954) 907-6862 (Name of Person) at (954) 907-6862

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

2017 FEB 20 AM 9: 08

I,	Wikola	Kelaya	, hereby resign as_	Vice	President
of	Healing	HODVEO Name of Cor	Psylo He	erapa	, Inc
P1	40000148 (Document Number,	67ac	orporation organized un		,
	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