## P14000029936

(Re	equestor's Name)	
(Ad	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bi	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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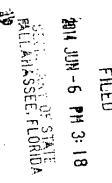




600260898666

Asignation Do Oggicer

06/06/14--01004--002 \*\*35.00



8 /18/14

## TRANSMITTAL LETTER

Division of Corporations

SUBJECT: Pathways of the Palm Beaches, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P14000029936

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Stephanie Winkles

(Name of Person)

Pathways of the Palm Beaches, Inc.

(Name of Firm/Company)

PO Box 740552

(Address)

Boynton Beach, FL 33474

(City/State and Zip Code)

Christopher Winkles 31,954 \ 464-900

(Name of Person)

For further information concerning this matter, please call:

(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

TO:

Amendment Section

Tallahassee, FL 32314

**Street Address:** 

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
2914 JUN - 6 PM 3: 18
STARRY OF STATE

<sub>I,</sub> Andre Fladell	, hereby resign as Director LAHASSEE. FLORIDA (Title)
of Pathways of the Pa	alm Beaches, Inc.
·	e of Corporation)
P14000029936 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	

ANDRE' FLADE!

(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