

P 140000 3228

(Requestor's Name)

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(City/State/Zip/Phone #)

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R. White

AUG 11 2014

R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All Student Care Inc.
(Name of Corporation)

DOCUMENT NUMBER: P14000032228

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

Please return all correspondence concerning this matter to the following:

Geovanni Granda

(Name of Person)

All Student Care Inc.

(Name of Firm/Company)

721 SW 98 Place Circle

(Address)

Miami, FL 33174

(City/State and Zip Code)

For further information concerning this matter, please call:

Geovanni Granda at **786 7862611644**
(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

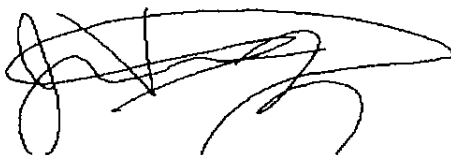
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Juliette Velez, hereby resign as Secretary
(Title)

of All Student Care Inc.
(Name of Corporation)

P14000032228, a corporation organized under the laws of the State of
(Document Number, if known)

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

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