## P14000057175

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
<u>-</u> . (	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
	Office Use Only	



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C.V.10-14

## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT, RC PHARMA, INC

(Name of Corporation)

DOCUMENT NUMBER: P14000057175

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

Please return all correspondence concerning this matter to the following:

LEONARDO FRANYIE

(Name of Person)

LEONARDO FRANYIE P.A

(Name of Firm/Company)

6625 MIAMI LAKES DR #319

(Address)

MIAMI LAKES FL 33014

(City/State and Zip Code)

For further information concerning this matter, please call:

LEONARDO FRANYIE

,,786 \985-1492

(Name of Person)

(Area Code & Daytime Telephone Number

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

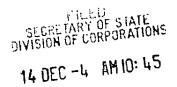
Mailing Address:

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



, ALAIN A TOLEDO	, hereby resign as PRESIDENT
	(Title)
of RC PHARMA, INC	
(Name of Co	orporation)
	corporation organized under the laws of the State of
,	
P14000057175	

(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