P14000093018

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TALLAHASSEE FLORIDA

JUN 3 0 2015 T CANNON

TRANSMITTAL LETTER

SUBJECT: Ally Fol BEHVIOLAL PROVIDERS, FACE

(Name of Corporation)

DOCUMENT NUMBER: P14000 93018

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

Please return all correspondence concerning this matter to the following:

Tania Digz

(Name of Person)

Ally FOR BEHAVIOLAL PROVIDERS, INC

(Name of Firm/Company)

19146 SW, 2444 place

(Address)

PEMBOCKE PINES, IL. 33029

(City/State and Zip Code)

For further information concerning this matter, please call:

Tania Digz

(Name of Person)

at (786) 202-0226

(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

TO:

Amendment Section Division of Corporations

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 JUN 19 PM 2: 45

I, Tania Dicz , hereby resign as_	Vice President
	(Title)
of A16 FOR BEHAVIORAL DROVID (Name of Corporation)	ERS, INC.
(Document Number, if known), a corporation organized und	ler the laws of the State of
FLORIDA	
•	
Qua Que	
(Signature of resigning officer/director	or)

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