

P15000078769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

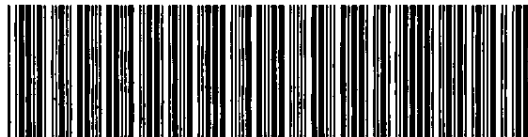
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100282363041

03/09/16--01022--024 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 MAR -9 P 2:15

FILED

MAR 10 2016

T. LEMIEUX

PO

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lion's Heart Coverage, Inc

(Name of Corporation)

DOCUMENT NUMBER: P15000078769

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

Please return all correspondence concerning this matter to the following:

Melyza C Eatmon

(Name of Person)

Lion's Heart Coverage

(Name of Firm/Company)

14125 NW 80th Ave, Suite 201

(Address)

Miami Lakes, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

Melyza C Eatmon

(Name of Person)

at (**305**) **746-5692**

(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

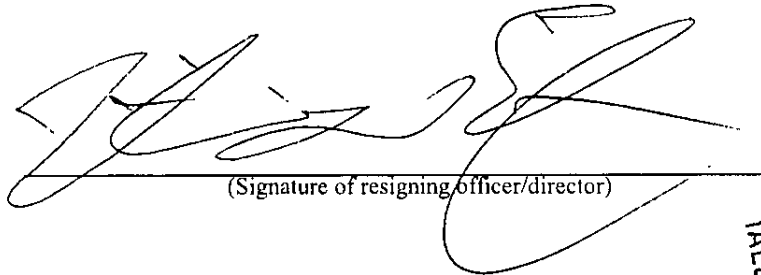
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Quinterrius D Eatmon, hereby resign as Vice President
(Title)

of Lion's Heart Coverage, Inc.
(Name of Corporation)

P15000078769, 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

FILED
2016 MAR -9 P 2:15
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA