P160000 86631

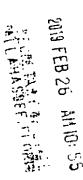
(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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C MCHAIR

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: HOPE CONSUMER SERVICES INC

(Name of Corporation)

DOCUMENT NUMBER: P16000086631

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

Please return all correspondence concerning this matter to the following:

Rose-Marie Aveloo

(Name of Person)

Hope Consumer Services Inc

(Name of Firm/Company)

3032 Dyer BLVD

(Address)

Kissimmee FL 34741

(City/State and Zip Code)

For further information concerning this matter, please call:

Rose-Marie Aveloo

,407 <u>,</u>334-880

(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. Rose-Marie Aveloo ...hereby resign as Vice Presidnet.

Of Hope Consumer Services Inc

(Name of Corporation)

P16000086631

(Document Number, (f'known)

Florida

Vice Presidnet.

(Title)

(Title)

(Title)

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314