P17000013097

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Glocard Corporation

(Name of Corporation)

DOCUMENT NUMBER: P17000013097

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

Please return all correspondence concerning this matter to the following:

Carla E. Croes

(Name of Person)

Glocard Corporation

(Name of Firm/Company)

10773 NW 58th Street, Ste. 395

(Address)

Doral, FL 33178

(City/State and Zip Code)

For further information concerning this matter, please call:

Carla E. Croes

... 786 、325-0515

(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

Juan C. Rodrigue	z Feal, hereby resign as Director	
	(Title)	
of Glocard Corporation	on	
(Nam	e of Corporation)	
P17000013097	, 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

