

P170000 55089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

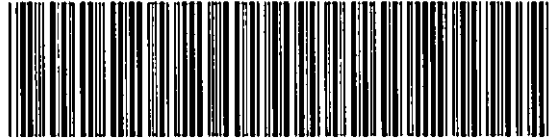
(Business Entity Name)

(Document Number)

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2018 MAY 21 P 3 52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

MAY 23 2018

T. LEWIS

10

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** James Club Recovery Center, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P17000055089

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

Please return all correspondence concerning this matter to the following:

Tracey V Castillo

(Name of Person)

James Club Recovery

(Name of Firm/Company)

301 S 57 Way

(Address)

Hollywood, FL 33023

(City/State and Zip Code)

For further information concerning this matter, please call:

Ray R Rapaglia

(Name of Person)

at ( 954 ) 380-1492

(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

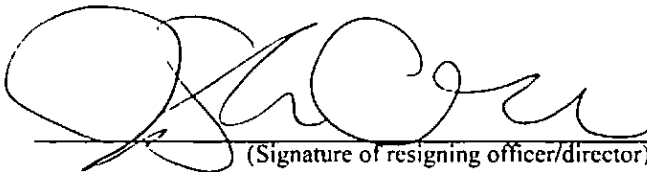
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JOSHUA CRAVER, hereby resign as Secretary  
(Title)

of JAMES CLUB RECOVERY CENTER, INC.  
(Name of Corporation)

P17000055089, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 MAY 21 P 3 52

FILED

**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