

P17000073619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

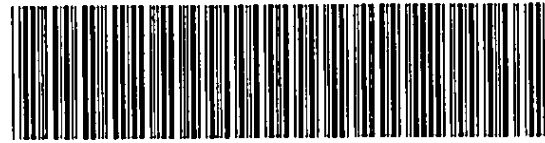
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FEB 10 2020
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROSE EMPLOYMENT SOLUTIONS, INC

(Name of Corporation)

DOCUMENT NUMBER: P17000073619

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Norman Rose

(Name of Person)

Rose Employment Solutions, Inc

(Name of Firm/Company)

1020 W. Busch Blvd.

(Address)

Tampa, FL 33612

(City/State and Zip Code)

For further information concerning this matter, please call:

Norman Rose at (813) 579-0727

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

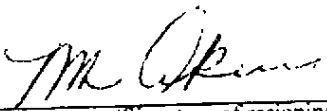
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Melvin Akins, hereby resign as Vice President
(Title)

of Rose Employment Solutions
(Name of Corporation)

P17000073619, 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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