

P20000089179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

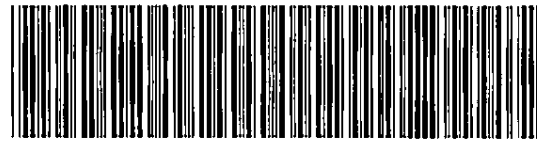
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2022 JUL -6 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EMPIRE HOME CARE INC

(Name of Corporation)

DOCUMENT NUMBER: P20000089179

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

ANISLEY LONGA

(Name of Person)

(Name of Firm/Company)

6854 NW 173 DR. UNIT 202

(Address)

HALEAH, FL 33015

(City State and Zip Code)

For further information concerning this matter, please call:

ANISLEY LONGA at (786) 395-4264

(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

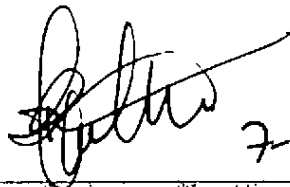
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2022 JUL -6 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FL

I, ANISLEY LONGA, hereby resign as VICE PRESIDENT (VP)
(Title)

of EMPIRE HOME CARE INC
(Name of Corporation)

P20000089179, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

 7-1-22

(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