

P210000 33413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

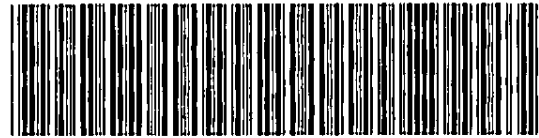
(Business Entity Name)

(Document Number)

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R. WHITE

AUG 05 2021

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FIRST CHOICE WEST COAST HHC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P21000033413  
\_\_\_\_\_

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

JESSICA MONTERO DANIEL  
\_\_\_\_\_  
(Name of Person)

FIRST CHOICE WEST COAST HHC  
\_\_\_\_\_  
(Name of Firm/Company)

5621 STRAND BLVD STE 310-A  
\_\_\_\_\_  
(Address)

NAPLES , FL 34110  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

JESSICA MONTERO DANIEL at ( 832 ) 744-7818  
\_\_\_\_\_  
(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:**

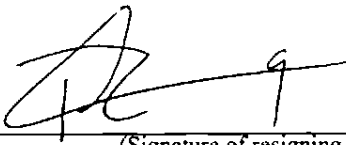
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ROILAN GOENAGA, hereby resign as VP  
(Title)

of FIRST CHOICE WEST COAST HHC  
(Name of Corporation)

P21000033413, 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