

P93000053403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

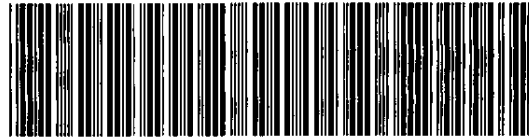
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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News  
6-29-10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Accu-Care Services Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P 93 0000 53 403

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

Please return all correspondence concerning this matter to the following:

Zayda C. De Paz  
(Name of Person)

Accu-care Services Inc  
(Name of Firm/Company)

8460 SW 80TH Place  
(Address)

Miami FL 33143  
(City/State and Zip Code)

For further information concerning this matter, please call:

Zayda C. De Paz at ( 305 ) 270-3255  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

2010 JUN 25 A 10:20

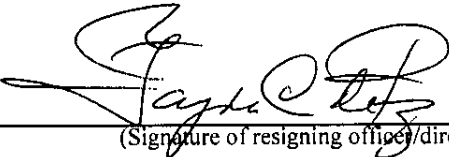
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Zayda C. De Paz, hereby resign as DPST  
(Title)

of Accu-Care Services Inc.  
(Name of Corporation)

P93000053403, 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