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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PARADISE HEALTH CARE CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P93000083533

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

Please return all correspondence concerning this matter to the following:

JAVIER TALAMO, ESQ.

(Name of Person)

KRAVITZ AND TALAMO, LLP

(Name of Firm/Company)

7600 W. 20 AVE. #213

(Address)

HIALEAH, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

JAVIER TALAMO, ESQ.

(Name of Person)

at (305) 558-5300

(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, CARMEN ATESNAK, hereby resign as PRESIDENT/DIRECTOR
(Title)

of PARADISE HEALTH CARE CORPORATION,
(Name of Corporation)

P93000083533, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.

x Carmen Atesnak
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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