

P94000019931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

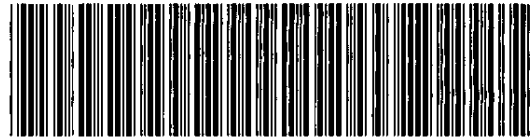
(Business Entity Name)

(Document Number)

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O/D Resign.

9/11/10

Dc

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Resignation of Officer/Director

(Name of Corporation)

DOCUMENT NUMBER: P94000019931

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

Please return all correspondence concerning this matter to the following:

ARTHUR J. GONZALEZ

(Name of Person)

WESTLAND HOME CARE SERVICES, INC.

(Name of Firm/Company)

8700 W. FLAGLER STREET #375

(Address)

MIAMI, FL 33174

(City/State and Zip Code)

For further information concerning this matter, please call:

ARTHUR J. GONZALEZ . at (305) 321-3776

(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**

I, ARTHUR J. GONZALEZ, hereby resign as PRESIDENT & SECRETARY
(Title)

of WESTLAND HOME CARE SERVICES, INC.
(Name of Corporation)

P94000019931, 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

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