

P95000051370

Dana M. Valdes

Requestor's Name

% NCF Insurance Associates

4090 Laguna

Coral Gables, Fla. 33146

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Home 7872 SW 102 Lane

(Corporation Name)

(Document #)

2. Min, Fla. 33156

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

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*****35.00 *****35.00

☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☒	Resignation of R., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FILED
98 AUG 14 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TLL AUG 11 1998

Dana M. Valdes
c/o NCF Insurance Associates
4090 Laguna
Coral Gables, FL 33146

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 13, 1998

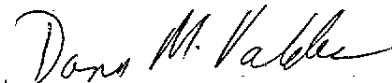
Department of State
409 East Gaines ST.
Tallahassee, FL 32399

RE: True Home Care, Inc.
FEIN# 65-05-92392

To whom it may concern:

This letter is to inform you that I am resigning as an officer from the above mentioned corporation, True Home Care, Inc. Please note that I have not been an active officer in said corporation since December, 1997. Enclosed you will find a check for the \$35.00 resignation fee. If this is not sufficient or you have any questions please do not hesitate to contact me. Thank you.

Sincerely,


Dana M. Valdes

DV/mn

cc: True Home Care, Inc.