P97000038970

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: THERAPY & COUNSELING CENTER, INC. (Name of Corporation)			
DOCUMENT NUMBER: P970000 38970			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
ANTONIO PASTOR (PA6SIDENT) (Name of Person)			
THERAPY &. COUNSELING GENTER, INC. (Name of Firm/Company)			
175 FONTAINEBLEAU BLUD. SUITE & R-14 (Address)			
MIÀMI, FL. 33172/ (City/State and Zip Code)			
For further information concerning this matter, please call:			
ANTONIO PAGTOA (PAGSIDENT) at (305) 227 - DOSA (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399			



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 21, 2005

ANTONIO PASTOR THERAPY & COUNSELING CENTER, INC. 175 FONTAINEBLEAU BLVD., SUITE 1-R-14 MIAMI, FL 33172

SUBJECT: THERAPY & COUNSELING CENTER, INC.

Ref. Number: P97000038970

We have received your document for THERAPY & COUNSELING CENTER, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The officer/diector resignation was not enclosed with your check.

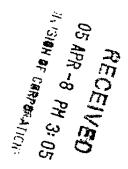
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 205A00019055





OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, FLORENCIA INTRIAGO	, hereby resign as PRESIDENT
	(Title)
of THERAPY & COUNSELING (Name of Corporation	CENTER INC.
(Document Number, if known), a corpor	ation organized under the laws of the State of
FLORIDA.	
× Nosleteca (Signature of r	esigning officer/directory

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