## P980000089443

(Re	questor's Name)	
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## **COVER LETTER**

SUBJECT: TLC BEST HOME CARE SERVICES, INC.
(Name of Corporation)  DOCUMENT NUMBER: P098000089643
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fil
Please return all correspondence concerning this matter to the following:
LISA BROWN
(Name of Person)
TLC Best Home Care, INC.
(Name of Firm/Company)
107 GREELEY LOOP
(Address)
DAVENPORT, FL 33897
(City/State and Zip Code)
For further information concerning this matter, please call:
LISA BROWN  at (407) 758-6353  (Name of Person) (Area Code & Daytime Telephone Number
(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

August 16,2006

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. LISA BROWN	, hereby resign as DIRECTOR / SECRETARY	
*)	(Titte)	
of TLC BEST HOME CARE S	ERVICES, INC.	
	me of Corporation)	
P098000089643	, 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