(Requestor's Name)		
(Address)		
(Address)	<del></del>	
(City/State/Zip/Phone #)		
PICK-UP WAIT MA	IL	
(Business Entity Name)	<del></del>	
(Document Number)		
Certified Copies Certificates of Status	<u>1,0,0+€</u> .	
Special Instructions to Filing Officer:		

Office Use Only



700162191007

11/02/09--01009--004 \*\*35.00



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2009

JANICE NULL INCORP SERVICES, INC. 375 N. STEPHANIE ST., SUITE 1411 HENDERSON, NV 89014-8909

SUBJECT: H.F.S. VIRGINIA, INC. Ref. Number: P98000095827

We have received your document for H.F.S. VIRGINIA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6964.

Letter Number: 009A00034683

Irene Albritton Regulatory Specialist II

Division of Corporations - P.O. ROY 6327 Tallahassaa Florida 32314

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUB.	DECT: H.F.S. VIRGINIA, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: P98000095827
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Jan	ice Null
	(Name of Person)
Inco	orp Services, Inc.
	(Name of Firm/Company)
375	N. Stephanie St., Suite 1411
	(Address)
Hen	derson, NV 89014-8909
	(City/State and Zip Code)
For fi	arther information concerning this matter, please call:
Janie	ce Null/Incorp Services, Inc. at (702 ) 866-2500 ext. 6505 (Area Code & Daytime Telephone Number)
<del></del>	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Ion of Corporations In Building Executive Center Circle Inassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. MARC J CHAMBERLAND	, hereby resign as Director
7	(Title)
of H.F.S. VIRGINIA, INC.	
	ne of Corporation)
P98000095827	, 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

09 NOV 30 PM 1:1

SECRETARY OF STATE
TALLAHASSEE, FLORIDA