<u>VUS31)</u>

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K. WHITE

TRANSMITTAL LETTER

TO: Amendment Section

CR2E044 (05/13)

Division of Corporation	15
SUBJECT:	EMPATHY CARE, INC. (Name of Corporation)
	(Name of Corporation)
DOCUMENT NUMBER:	V45317
The enclosed Officer/Director I	Resignation for a Corporation and fee are submitted for filing
Please return all correspondenc	ee concerning this matter to the following:
•	<i>5</i>
Hunter B. Craig, E. (Name of	squire
(Name of	Person)
Witte & Craio P.A	
Witte & Craig, P.A (Name of Fin	m/Company)
001 07 0/11	
201 SE 24th Avenue (Addr	ress)
Pompano Beach, FL (City/State an	33062 id Zin Code)
For further information concern	
ror tarales information concert	ing this matter, please can:
Hunter B. Craig	at (<u>954</u>) <u>941.5533</u> (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.
	purpose, to the restaurance of source
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Fallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
19.32-3	
	· · ·

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	GILDA OSBORN	, hereby resign as_	Secretary (Title)
,	ı		, ,
of	EMPATHY CARE, INC.	•	. <u></u>
	(Name of Corporation)	
	V45317 (Document Number, if known)	, a corporation organized und	der the laws of the State of
	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 SECRETARY OF STATE