

P16000073917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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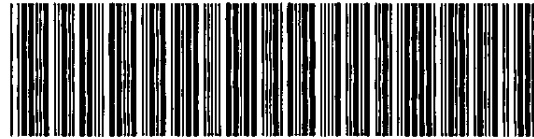
(Business Entity Name)

(Document Number)

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2016 DEC 16 AM 9:13  
TULSA  
TULSA COUNTY  
DIVISION OF CORPORATION

DEC 19 2016  
C LEWIS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CASA MONDRAGONE, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P16000073917

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**H Wayne Hayes, Jr.**

(Name of Person)

**PatientTrac Corporation**

(Name of Firm/Company)

**975 Arthur Godfrey Road, Suite 401**

(Address)

**Miami Beach, Florida 33140**

(City/State and Zip Code)

For further information concerning this matter, please call:

**H Wayne Hayes, Jr.** at **305 428-8326**

(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:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2016 DEC 16 AM 9:13

I, SALVATORE MATUOZZO, hereby resign as President  
(Title)

of CASA MONDRAGONE, INC.  
(Name of Corporation)

P16000073917, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Salvatore Matuzzo 12/15/2016  
(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