

P98 000062981

Requester's Name

Address

PO Box 900947
Miami FL 33290-0947

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C) NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- Walk in Pick up time _____ Certified Copy
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NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

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01/23

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

OFFICER / DIRECTOR RESIGNATION

FILED
00 JAN 28 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ROBERT M WHITNEY, hereby resign as OFFICER/DIRECTOR
(Title)

of INVERARY ORTHOPEDIC REHAB CENTER INC.
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

Robert M Whitney
(Signature of resigning officer/director)

EFFECTIVE DATE OF RESIGNATION 07/16/1998

FILING FEE IS \$35.00

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**