

PD1000086664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

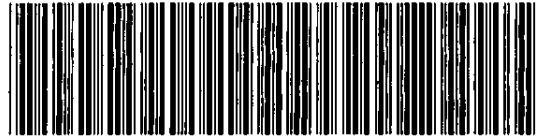
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DD Res
12/10/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bello-Burgos, D.M.D., P.A.

(Name of Corporation)

DOCUMENT NUMBER: P01000086664

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

Please return all correspondence concerning this matter to the following:

Julio J. Burgos

(Name of Person)

(Name of Firm/Company)

12095 N.W. 5th Street

(Address)

Miami, FL 33182

(City/State and Zip Code)

For further information concerning this matter, please call:

Julio J. Burgos

(Name of Person)

at (305) 542-1097

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Julio J. Burgos, hereby resign as Vice President
(Title)

of Bello-Burgos, D.M.D., P.A.
(Name of Corporation)

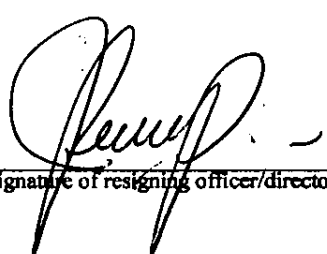
P01000086664, a corporation organized under the laws of the State
(Document Number, if known)

Florida

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 DEC -4 AM 10:05

FILED


(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