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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT:	Serfer Medical Group, Inc.
	(Name of Corporation)
DOCUMENT	NUMBER: 601146
The enclosed C	Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return a	Il correspondence concerning this matter to the following:
Michael	L. Trop, Esq.
	(Name of Person)
Adorno	& Yoss LLP
	(Name of Firm/Company)
350 Eas	t Las Olas Boulevard, 17th Floor
	(Address)
Fort La	uderdale, FL 33301
	(City/State and Zip Code)
For further info	ormation concerning this matter, please call:
Mich	ael L. Trop  (Name of Person)  at (954) 766-7802  (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.

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, _	Eric S	erfer	·	, hereby resign as_	Secretary	<del></del>
•	Serfer	Medical	Group.	Inc.	(Title)	
of_			(Name of Co			
	601146		, a (	corporation organized un	der the laws of the State	of
	(Document Nu	mber, if known)				
	Florida					
	E	<i>e</i> =	(Signati	ure of resigning officer/directic S. Serfer	or)	DIVISION OF CORPORA  08 JUN -9 PM 7
			FILIN	NG FEE IS \$35.00		2: 51

Make checks payable to Florida Department of State and mail to:

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