

604408

Requester's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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-02/11/00--01119--001
****262.50 *****43.75

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

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

*OK Per
2-21-00
PMS*

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 FEB 11 PM 1:24

FILED

Examiner's Initials

OFFICER / DIRECTOR RESIGNATION

FILED
00 FEB 11 PM 1:24
CLERK OF STATE
TALLAHASSEE, FLORIDA

I, Nicholas J. Pastis, M.D., hereby resign as President and Director and all
(Title) other offices

of Nicholas J. Pastis, M.D., P.A.,
(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.

Nicholas J. Pastis M.D.
(Signature of resigning officer/director)
Nicholas J. Pastis, M.D.

FILING FEE IS \$35.00