

F12 0000004446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

C.M.
8-20-14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tri-Med Associates, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F12000004446

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

Please return all correspondence concerning this matter to the following:

Edwin B. Kagan

(Name of Person)

Edwin B. Kagan, P.A.

(Name of Firm/Company)

2709 N. Rocky Point Dr., Suite 102

(Address)

Tampa, FL 33607

(City/State and Zip Code)

For further information concerning this matter, please call:

Edwin B. Kagan

(Name of Person)

at (813) 281-5609

(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

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TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

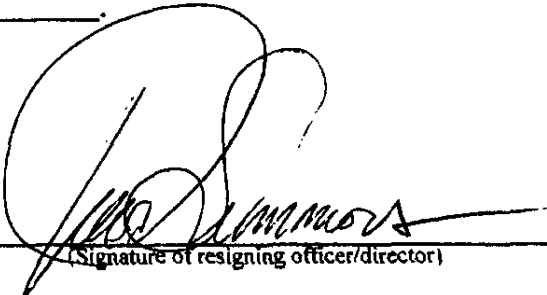
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TALLAHASSEE, FLORIDA

I, Teresa Simmons, hereby resign as Director and President
(Title)

of Tri-Med Associates, Inc.
(Name of Corporation)

F12000004446, a corporation organized under the laws of the State of
(Document Number, if known)

Delaware


(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