

F96000003939

Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4000

From:

Account Name : RAPPEL & RAPPEL, P.A.
Account Number : 076043001611
Phone : (561) 231-7223
Fax Number : (561) 231-8824

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99 MAR -8 PM 3:01

DIVISION OF CORPORATIONS

REGISTERED AGENT RESIGNATION

PSL COMMUNITY CARE CENTER, INC.

99 MAR -8 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To: Division of Corporations
Fax Number : (850)922-4000

From: Account Name : RAPPEL & RAPPEL, P.A.
Account Number : 076043001611
Phone : (561)231-7223
Fax Number : (561)231-8824

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MAR-08-99 14:23

FROM-Rappel and Rappel PA

T-353 P.03

F-871



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 8, 1999

PSL COMMUNITY CARE CENTER, INC.
9454 SOUTH U.S. 1
PORT ST. LUCIE, FL 34952

SUBJECT: PSL COMMUNITY CARE CENTER, INC.
REF: F96000003939

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 15.16(3), Florida Statutes, requires each document to contain in the lower left-hand corner of the first page the name, address, and telephone number of the preparer of the original and, if prepared by an attorney licensed in this state, the preparer's Florida Bar membership number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell
Corporate Specialist

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Letter Number: 099A00010493

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

MAR-08-98 14:22

FROM-Rappel and Rappel PA

T-353 P.02

F-871

H99000005418

**FLORIDA DEPARTMENT OF STATE,
KATHERINE HARRIS, SECRETARY OF STATE**

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, **ROBERT RAPPEL**, hereby resigns as Registered Agent for **PSL COMMUNITY CARE CENTER, INC.**

A copy of this resignation was mailed to the above listed corporation at its last known address. The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


ROBERT RAPPEL

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99 MAR -8 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Prepared by:
Robert Rappel, D.O., J.D.
Rappel & Rappel P.A.
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Vero Beach, Florida 32963
(561) 231-7223
Fla Bar # 0015156

H990000054181