

J36457

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OCCUPATIONAL AND REHABILITATION CENTER, P.A.
(Name of Corporation)

DOCUMENT NUMBER: J36457

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

Please return all correspondence concerning this matter to the following:

DR. CARLOS A. OTEYZA

(Name of Person)

(Name of Firm/Company)

6144 GAZEBO PARK PL. S # 101

(Address)

JACKSONVILLE, FL 32257

(City/State and Zip Code)

For further information concerning this matter, please call:

DR. JACKSON C. TAN

(Name of Person)

at (904) 260-3011

(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, DR CARLOS A. OTEYZA, hereby resign as SECRETARY
(Title)

of OCCUPATIONAL AND REHABILITATION CENTER, P.A.
(Name of Corporation)

J36457, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

C. Oteyza

(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

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