

L04000045596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

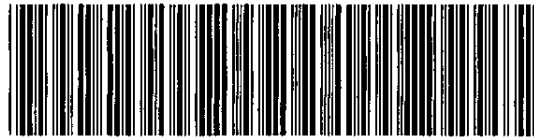
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATION  
08 MAY -2 AM 8:24

G. MCLEOD

MAY - 5 2008

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tranquility Anesthesia, PLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Allan R. Escher, Jr., DO  
(Contact Person)

Tranquility Anesthesia, PLC  
(Firm/Company)

29635 Eagle Station Drive 21035 Lake Vienna Dr.  
(Address)

Tampa, FL 33543 Land O' Lakes, FL 34638  
(City/State and Zip Code)

For further information concerning this matter, please call:

Allan R. Escher, Jr., DO at ( 813 ) 948-9343  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

March 31, 2008

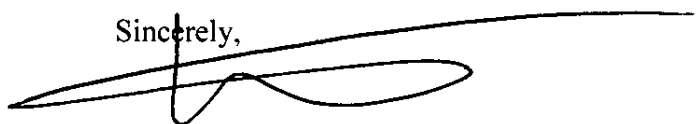
Tranquility Anesthesia, PLC  
29635 Eagle Station Drive  
Tampa, FL 33543

Re: Resignation – Tranquility Anesthesia, PLC

Dear Sir or Madam:

I hereby resign my position as a managing member of Tranquility Anesthesia, PLC.

Sincerely,

A handwritten signature in black ink, consisting of a series of loops and a long horizontal stroke extending to the right.

Edgar Ramirez-Pagan, M.D.



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Tranquility Anesthesia, PLC

2. This limited liability company was organized under the laws of:  
Florida

3. The Florida document/registration number of this limited liability company is:  
L04000045596

4. I, Edgar Ramirez-Pagan, M.D., hereby resign as a Managing Member  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)