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LLC REGISTERED AGENT RESIGNATION UROCARE, LLC

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

ruistiant to the provis	aons of section 605.0115, rionga Samiles, the tine	dersigned,	
Dorothy L. Korszen		, hereby resigns as	
	Name of Registered Agent		
Registered Agent for	UROCARE, LLC		
	Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·	
L06000063373			
Document	Number, if known		
A copy of this resigna	tion was mailed to the above listed limited liabili	ty company at its last known address.	
The agency is termina	ated and the office discontinued on the 31st day at	fter the date on which this statement is filed	
	Down D Signary re of Resigning Agen	ZOZO HAY TALL ARIAN	
If signing on behalf o	f an entity:	38 7 1	
	Dorothy L. Korszen		
	Typed or Printed Name	50 3 M	
	Registered Agent		
	Capacity	10 10	

FILING FEES:

Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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