

L06000088685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

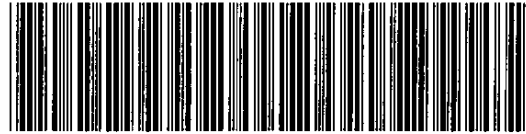
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07 DEC 10 PM 2:07

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. Hampton DEC 10 2007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Concierge Plus of the Boca Clinic, LLC
(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:

Deborah Branhart, Esq.
(Contact Person)

(Firm/Company)

6400 Congress Avenue, Ste. 1400
(Address)

Boca Raton, Florida 33487
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Branhart at (561) 314-2535
(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

December 4, 2007

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

RE: Concierge Plus of the Boca Clinic, LLC – Manager Resignations

To Whom It May Concern:

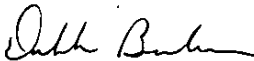
Enclosed please find two resignation of Manager forms indicating the resignation of two managers for the LLC: Drs. Marc Schlosser and Meyer Cohen. The original submission was done on November 14th in which I had submitted the form with both managers listed on the one form. I was unaware each resignation needed to be submitted separately. As a result, I am sending a separate form for each manager who has resigned. Please see the enclosed forms.

With respect to payment, please note that as part of the original submission I sent a check for \$55.00 to cover the filing fee and obtain a certified copy. The check was written by Boca Raton Medical and Surgical Specialists Management Company, LLC on behalf of Concierge Plus of the Boca Clinic, LLC. The check was not returned to me along with the original submission. Please apply that check to this revised submission. I have enclosed a copy of the original submission cover letter and a copy of the check.

Please contact me if you require additional information or have any questions.

Thank you for your attention to this matter.

Sincerely,



Deborah Branham

Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2007

DEBORAH BRANHAM, ESQ
6400 CONGRESS AVE
STE 1400
BOCA RATON, FL 33487

SUBJECT: CONCIERGE PLUS OF THE BOCA CLINIC, LLC
Ref. Number: L06000088685

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 DEC 10 AM 8:59

RECEIVED

We have received your document for CONCIERGE PLUS OF THE BOCA CLINIC, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can only file 1 person on each resignation form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 907A00066717



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: Concierge Plus of the Boca Clinic, LLC

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

3. The Florida document/registration number of this limited liability company is:
L06000088685

4. I, Meyer Cohen, hereby resign as a Manager
(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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 DEC 10 PM 2: 07