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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Amendment Section
Division of Corporations

SUBJECT: St. Augustine Physical Medicine, LLC

DOCUMENT NUMBER: G09000158842

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Solano, D.C.
1100 S. Ponce de Leon Blvd., Ste 3A
St. Augustine FL 32084
E-mail address (to be used for future annual report notification): solchiro@hotmail.com

For further information concerning this matter, please call:

James Solano at (904) 429.7071

Enclosed is a check made payable to the Florida Department of State for $85.00 for an active limited liability company or $25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned, Luke Law, LLC, hereby resigns as Registered Agent for St. Augustine Physical Medicine, LLC.

Document Number: ~~G09000158842~~ L11000040118

A copy of this resignation was mailed to the above-named limited liability company 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.

8.24.11

Gary L. Luke
Luke Law, LLC
Managing Member
1409 Kingsley Ave., Bldg 9E
Orange Park, FL 32073

FILED
11 AUG 31 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA