

# L11000101164

Florida Department of State  
Division of Corporations  
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**LLC REGISTERED AGENT RESIGNATION**  
**YVETTE P. ANS MD, LLC**

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19 JUL -5 AM 8:20

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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

UPM SERVICE CORP.

, hereby resigns as

\_\_\_\_\_  
Name of Registered Agent

Registered Agent for Yvette P. Ans MD, LLC

\_\_\_\_\_  
Name of Limited Liability Company

\_\_\_\_\_  
Document Number, if known

A copy of this resignation was mailed to the above listed 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.

Designated by:

John Camperlengo  
\_\_\_\_\_  
Resigning Agent

If signing on behalf of an entity:

JOHN CAMPERLENGO

\_\_\_\_\_  
GENERAL COUNSEL

\_\_\_\_\_  
Capacity

### FILING FEES:

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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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