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LLC REGISTERED AGENT RESIGNATION  
HEALTHY CHOICE OB-GYN, LLC

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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 Healthy Choice OB-GYN, 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.

DecSigned by:

*John Camperlengo*

Signature of 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17 (2/14)

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STATE DEPT OF STATE  
DIVISION OF CORPORATIONS