

L12000006543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

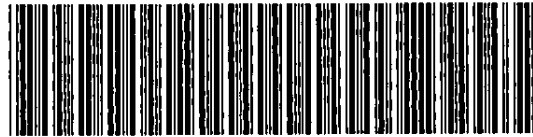
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

APR 2 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stand-Up Open MRI of Pensacola, 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:

Cynthia Huss

(Contact Person)

Stand-Up Open MRI of Pensacola

(Firm/Company)

P.O. Box 11982

(Address)

Pensacola, FL 32524

(City/State and Zip Code)

For further information concerning this matter, please call:

Cynthia Huss

(Name of Contact Person)

at 850 479-4223

(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

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TALLAHASSEE, FLORIDA

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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: Stand-Up Open MRI of Pensacola, 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:
L12000006543

4. I, Alex Cover, hereby resign as a Managing Member *mgr*
(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)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2013

STAND-UP OPEN MRI OF PENSACOLA, LLC
997 S. PALAFOX STREET
SUITE 110
PENSACOLA, FL 32502

SUBJECT: STAND-UP OPEN MRI OF PENSACOLA, LLC
Ref. Number: L12000006543

This will acknowledge receipt of your check totaling \$25.00 which is being returned for the following reason.

No forms attached. (?)

Please return 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) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 113A00005942

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TALLAHASSEE, FLORIDA