

# L13000074073

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (718)889-7420

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT RESIGNATION  
GYN ONCOLOGY AND UROGYNECOLOGY ASSOCIATES,  
LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

19 JUL -2 AM 8:11

SECRETARY OF STATE  
CALL ADVISORY 07/01/19

2019 JUL -2 AM 9:44

FILED

JUL 03 2019

M. SOLOMON

DocuSign Envelope ID: AB4549BD-F0F4-4818-88D3-A1D6FE811AD5

**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 Gyn Oncology and Urogynecology Associates, LLC

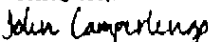
Name of Limited Liability Company

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:



Name 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

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