



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2014

VACATION HEALTH SOLUTIONS GROUP
13552 EYAS ROAD
ORLANDO, FL 32837-8075

200266727722

SUBJECT: VACATIONS MEDICAL SOLUTIONS, LLC
Ref. Number: L14000073128

Debit Memo #: 12234-A

Due to your failure to respond to our previous letter advising you of the attached returned check #1014, the ~~Officer/Director or Member/Managing Member~~ *Name Chg. Amend.* ~~Resignation~~ for VACATIONS MEDICAL SOLUTIONS, LLC has been cancelled and is considered not filed as of November 20, 2014.

~~Please be advised the individual resigning in the document that was cancelled is now reflected as a current officer and/or director or member/managing member.~~

If you have any questions concerning the returned check, please call (850) 245-6887.

Sincerely
Garry Leonard
Administrative Assistant
Division of Corporations

Letter number: 914A00024657



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2014

VACATION HEALTH SOLUTIONS GROUP
13552 EYAS ROAD
ORLANDO, FL 32837

SUBJECT: VACATIONS MEDICAL SOLUTIONS, LLC
Ref. Number: L14000073128

Debit Memo #: 12234-A

This is to inform you that your check #1014 dated September 16, 2014 in the amount of \$25.00 and submitted for VACATIONS MEDICAL SOLUTIONS, LLC has been returned to us by your bank because of NON SUFFICIENT FUNDS.

As we cannot take credit card information over the phone, we request that you remit a cashier's check or money order in the amount of \$40.00 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Garry Leonard
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 245-6887.

Sincerely,
Garry Leonard
Administrative Assistant
Division of Corporations

Letter number: 314A00021468