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Division of Corporations Electronic Filing Cover Sheet

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Account Number : 075350000353 Phone : (800)221-2972

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

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LLC REGISTERED AGENT RESIGNATION ADVANCED GYNECOLOGY AND OBSTETRICS, LLC

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0	115, Florida Statutes, the undersigned,	
UPM SERVICE CORP.	, hereby resigns as	
Name of Registered /	\gax	
Registered Agent for Advanced Gyner	cology and Obstetrics, LLC	
Name of	Limited Liability Company	•
Document Number, if known		
	ne above listed limited liability company at its last known address.	
The agency is terminated and the office di-	scontinued on the 31st day after the date on which this statement is	s filed.
	Docus Signed by: John Campurlings _0220 9688993488 pt Resigning Agent	
		 ₹* ¢./.
If signing on behalf of an entity:	OHN CAMPERLENGO	575
(GENERAL COUNSEL	ps 197 777 (* 1
* * * * * * * * * * * * * * * * * * *	Capacity	TARTY ASSE
		OF STAGE
FILI \$ 85.0 \$ 25.0	NG FEES: Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company	जित्से "

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallehassee, FL 32314