

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L19000304721

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P.A.

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INTEGRATED MEDICAL ALLIANCE, LLC**

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Electronic Filing Menu

Corporate Filing Menu

Help

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FEB 14 2020



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Integrated Medical Alliance, LLC

2. The Florida document/registration number assigned to this limited liability company is: L19000304721

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 2/12/2020

4. I, John H. Franklin, Jr., hereby withdraw/resign as a Manager
(Print Name of Person Resigning)

Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)