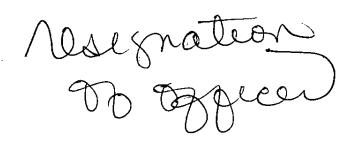
L57437

(Requestor's Name)		
(Address)		
(,		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
		
(Business Entity Name)		
(Document Number)		
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Special Instructions to Filing Officer:		
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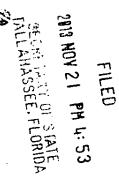
Office Use Only



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COVER LETTER

Division of Corporations Jay S. Mendelsohn, MD, PA (Name of Corporation) L57437 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Manish Patel (Name of Person) Jay S. Mendelsohn, MD, PA (Name of Firm/Company) 3230 Stirling Road (Address) Hollywood, FL 33021 (City/State and Zip Code) For further information concerning this matter, please call: Manish Patel (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Division of Corporations Amendment Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section

FILED

OFFICER / DIRECTOR RESIGNATION | PM 4:53

FOR A CORPORATION
SECRETARY OF STATE
FALL AHASSEE, FLORIDA

Manish Patel	, hereby resign as	Vice President (AVP)
· · · · · · · · · · · · · · · · · · ·		(Title)
Jay S. Mendelsohn, MD, PA		
(Name	of Corporation)	
L57437 (Document Number, if known)	, a corporation organized uno	ler the laws of the State of
Florida	 ·	
<i>;</i>	ellefates	_
(Signature of resigning officer/direct	or)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314