

MD10000000627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

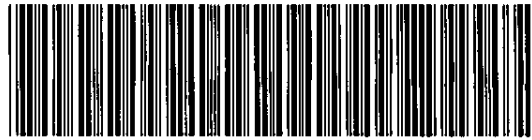
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

AUG 31 2015
S. YOUNG

SUNSHINE CORPORATE & FILING SERVICES, INC.

3458 Lakeshore Drive
Tallahassee, Florida 32312
(850) 656-4724

Please file
2nd

* *

COVER LETTER
DATE: 8-28-15
WALK IN

ENTITY

NAME: THE FT. MYERS DIGESTIVE
HEALTH AND PAIN ASC, LLC

PLEASE FILE THE ATTACHED AND RETURN:

☒ PLAIN COPY
☐ CERTIFIED COPY

CHECK # 1-899
AMOUNT: 2500

PLEASE CONTACT TINA AT 850-508-1891 FOR FURTHER
INFORMATION ON THIS MATTER!

THANK YOU SO MUCH!

TINA GOFF, PRESIDENT
SUNSHINE CORPORATE & FILING SERVICES, INC.

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TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

THE FT. MYERS DIGESTIVE HEALTH AND PAIN ASC, LLC

(Name of limited liability company)

Tennessee

(Jurisdiction of its organization)

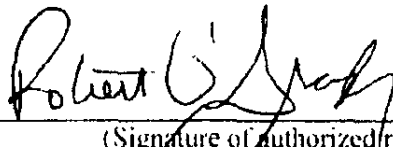
03/22/2001

(Date registered with Florida Department of State)

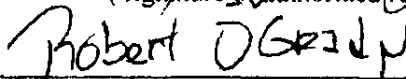
M01000000627

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)



(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00