# Florida Department of State Division of Corporations

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To

Division of Corporations

Fax Number : (850)617-6383

From:

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### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

2. This limited liability company was organized under the laws of:  Texas  3. The Florida document/registration number of this limited liability company is:  M0200002135	1. The name of the limited liability company as it ap of State is: Advance Physical Therapy		of the Florida De	partment
M02000002135		er the laws of:		
	M02000002135		Ãs A	
4. I, HOWARD GRUVERMAN , hereby resign as a MANAGER (Print Name of Person Resigning)	4. I, HOWARD GRUVERMAN  (Print Name of Person Resigning)	, hereby resign as a	MANAGER (Print Title)	- O
of this limited liability company and affirm the limited liability company has been obtified of my resignation in writing.	of this limited liability company and affirm the lim			ed of my
Hond!s. Gen = 0			STATE CORID,	O
Signature of Resigning Member, Managing Member or Manager	Signature of Resigning Member, Managing Memb	er or Manager		
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