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REPLY TO ORLANDO

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

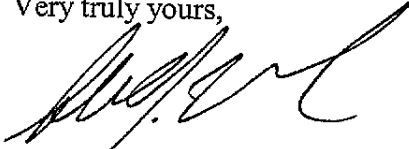
RE: Alexis Health

Dear Sir/Madame :

Pursuant to Florida Statute 607.0502(2), please find the attached Resignation of Registered Agent for Alexis Health (document number P00000055477) and filing fee in the amount of \$87.50. I hereby certify that a true and correct copy of this letter was mailed to Alexis Health, Inc. at its principal place of business (i.e. 114 Wilshire Plaza Blvd., Casselberry, FL 32707).

Please note this change in your records. Any and all future correspondence should be directed to me at this new address. Thank you for your assistance.

Very truly yours,



Scott J. Uricchio

SJU/tlm

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LAURI RILEY  
JENA MALONE  
MARTA RODRIGUEZ

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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RA/RW  
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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF REGISTERED AGENT**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Scott J. Uricchio  
(Name of registered agent)

hereby resigns as Registered Agent for Alexis Health, Inc.  
(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.

[Signature]  
(Signature of resigning agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

01 JUL 27 PM 1:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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