

P00000101077

(Requestor's Name)

SA LEON
8891 SEGOVIA WAY
PEMBROKE PINES, FL. 33331

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE FLORIDA

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Maritza C. Leon, hereby resign as vice president
(Title)

of Leon Dental Center Inc.
(Name of Corporation)

P00000101077, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Maritza Leon
(Signature of resigning officer/director)

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P.O. Box 6327
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