

**PD1000010775**

**Florida Department of State  
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**From:**

Account Name : HARPER, KYNES, GELLER & BUFORD  
Account Number : 070651000745  
Phone : (727) 799-4840  
Fax Number : (727) 797-8206

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**REGISTERED AGENT RESIGNATION**

**SUNSHINE PHYSICAL THERAPY & FITNESS CENTER, INC.**

Certificate of Status	0
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DIVISION OF CORPORATION

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Dorothy C. Roer

(Name of Registered Agent)

hereby resigns as Registered Agent for Sunshine Physical Therapy & Fitness Center, Inc.

(Name of Corporation)

P01000010775

(Document Number, if known)

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.

*Anthony C. Cook*  
(Signature of Resident)

(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

**[Capacity]**

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**Fee for filing this document:**

**\$87.50 - Active corporation**

**\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation**

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