

PO1000079970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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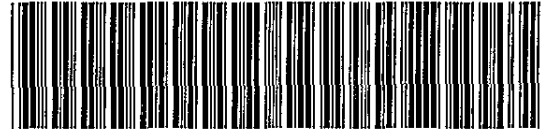
(Business Entity Name)

(Document Number)

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05 JUN -3 PM12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A. Resignation

T BROWN JUN - 6 2005

LEFTER, WILKINSON & SADORF, L.L.C.

ATTORNEYS AND COUNSELORS AT LAW
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MAIN OFFICE
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ST. PETERSBURG, FL 33701
OFFICE (727) 823-1514
FAX (727) 823-0328

RICK W. SADORF
G. BARRY WILKINSON

OF COUNSEL
J. BAIRD LEFTER

REPLY TO:
CLEARWATER OFFICE

June 01, 2005

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

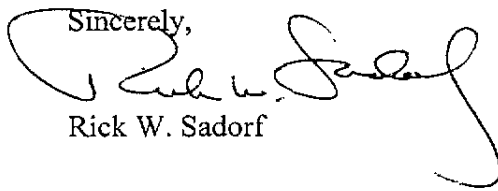
Re: Medic Healthcare, Inc.

Dear Ladies & Gentlemen:

Please process the enclosed Transmittal Letter and Resignation of Registered Agent for a Corporation regarding the aforementioned company. I have also enclosed Lefter, Wilkinson & Sadorf, LLC Check No. 1378 in the amount of Thirty-five and No/100 Dollars (\$35.00) for the processing fee.

Thanking you in advance for your timely response. If you have any questions or need any additional information, please feel free to contact me.

Sincerely,


Rick W. Sadorf

RWS/sly

Enc.

cc: Medic Healthcare, Inc.

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

FILED
05 JUN -3 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Florida Statutes, the undersigned, Rick W. Sadorf, Esq.

(Name of Registered Agent)

hereby resigns as Registered Agent for Medic Healthcare, Inc.

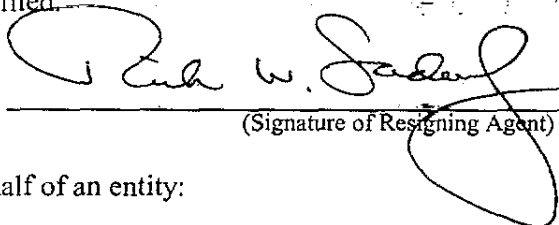
(Name of Corporation)

P01000079970

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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