

PO1000081135

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000133789 3)))



H090001337893ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN -2 PM 2:42

FILED

COR AMND/RESTATE/CORRECT OR O/D RESIGN

CAPITAL REHAB CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED
2009 JUN -2 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

off. Resign.

TB

6-2-09

FROM : LAZARUS

FAX NO. : 3052201440

Jun. 02 2009 12:27PM P2

H09000133789

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2009 JUN -2 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JORGE A. DAVILA, hereby resign as VPS-D
(Title)

of CAPITAL REHAB CENTER, INC.
(Name of Corporation)

P010000081135, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILING FEE IS \$35.00

H09000133789