

P020000026149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

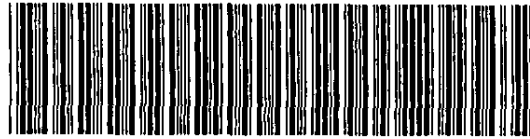
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200250559792

08/12/13--01004--023 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG 12 PM 3:15

AUG 15 2013

T. BROWN

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: South Lake Management Corporation
(Name of Corporation)

DOCUMENT NUMBER: P02000026149

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lili Brown

(Name of Person)

Sports Medicine Institute International LLC

(Name of Firm/Company)

1925 Don Wickham Drive

(Address)

Clermont FL 34711

(City/State and Zip Code)

For further information concerning this matter, please call:

Lili Brown

(Name of Person)

at (352) 243-9700

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG 12 PM 3:15

I, James M Ray, hereby resign as Director
(Title)

of South Lake Management Corporation,
(Name of Corporation)

P02000026149, 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

Make checks payable to Florida Department of State and mail to:

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