## P02000074863

(Re	questor's Name)	
(Ad	dress)	
- (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





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10/05/09--01023--002 \*\*35.00

FILED
2009 OCT -5 PM 3: 01

off. Resign.

 $\Gamma B$  oct - 7 2009

## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Universal Kidney Center of Davie, Inc.  (Name of Corporation)
DOCUMENT NUMBER: P0200074863
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
•
Please return all correspondence concerning this matter to the following:
E. Angelo Bartolome
(Name of Person)
Universal Kidney Center of Davie, Inc.
(Name of Firm/Company)
2004 NE 49th St.
. (Address)
Fort Lauderdale, Florida 33308
(City/State and Zip Code)
For further information concerning this matter, please call:
E. Angelo Bartolome 954 770-6540
E. Angelo Bartolome at (954) 770-6540 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I. Bharat Gupta	, hereby resign as Director
	(Title)
of Universal Kidney Center of I	Davle, Inc.
	ne of Corporation)
P02000074863 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	·
18	(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