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COVER LETTER

	mendment Section vision of Corporations
SUBJEC"	Γ: Universal Health Care, Inc. (Name of Corporation)
DOGUN	Doogoogoo
DOCUM	ENT NUMBER: P02000082388
The enclo	sed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please ret	urn all correspondence concerning this matter to the following:
James (D'Drobinak
	(Name of Person)
Universa	al Health Care, Inc.
	(Name of Firm/Company)
100 Cer	ntral Ave, Suite 200
	(Address)
St. Pete	rsburg, FL 33701
	(City/State and Zip Code)
For furthe	r information concerning this matter, please call:
Sandip I.	at () ····
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed i	is a check for \$35.00 made payable to the Florida Department of State.
Street Ad Amendme Division o Clifton Bu 2661 Exec Tallahasse	dress: Int Section If Corporations Idding Id

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

TATECRETARY PH 3: 34

I, James O'Drobinak	, hereby resign as	Chief Operating Officer	
		(Title)	
of Universal Health Care, Inc.			
	ame of Corporation)		
P02000082388	, a corporation organized un	oration organized under the laws of the State of	
(Document Number, if known)			
Florida			

(Signature of religning 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