

P02000105219

(Requestor's Name)

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(Business Entity Name)

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*Resignation
by
officer*

10/06/03--01057--018 **70.00

03 OCT -6 PM 4:48
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*ADR
10/13/03*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JNS Medical Consulting Corporation
(Name of Corporation)

DOCUMENT NUMBER: 02000105219

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

Please return all correspondence concerning this matter to the following:

Judith Moran

(Name of Person)

JNS Medical Consulting Corporation

(Name of Firm/Company)

~~P.O. Box 3377~~ 13938 75th Ave N
(Address)

Seminole, FL 33775-6

(City/State and Zip Code)

For further information concerning this matter, please call:

Judith Moran

(Name of Person)

at (727) 692-5844

(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION FILED
FOR A CORPORATION**

03 OCT -6 PM 4: 48


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Sherri Kulak, hereby resign as VP/Secretary/Treasurer
(Title)

of JNS Medical Consulting Corp.
(Name of Corporation)

p02000105219, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

 6/30/03 SK
(Signature of resigning officer/director) 7/1/03 SK

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