Division of Corporations Electronic Filing Cover Sheet

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From:

Account Name : BAKER & HOSTETLER LLP

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REGISTERED AGENT RESIGNATION OSCEOLA RADIOLOGY ASSOCIATES, P.A.

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RESIGNATION OF REGISTERED AGENT SECRET OF STATE TALLAHASSEE. FLORIDA

| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, |
|--|
| Florida Statutes, the undersigned, David L. Schick, Esq. |
| (Name of Registered Agent) |
| hereby resigns as Registered Agent for Osceola Radiology Associates, P.A. |
| (Name of Corporation) |
| P03000023892 |
| (Document Number, if known) |
| A copy of this resignation was mailed to the above listed corporation at its last known address. |
| The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. (Signature of Resigning Agent) |
| If signing on behalf of an entity: |
| ; :, : |
| (Typed or Printed Name) |
| |
| The state of the s |
| (Capacity) |

Fee for filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314