

P04000006972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

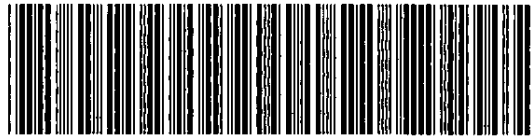
(Business Entity Name)

(Document Number)

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APPROVED
AND
FILED

07 NOV 15 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Opp. Resign.

C. Coultette NOV 20 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A class medical, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO400000 6972

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

Please return all correspondence concerning this matter to the following:

Ramon E. Vargas
(Name of Person)

SS
(Name of Firm/Company)

3783 Gordon Street
(Address)

Terrell, North Carolina 28682
(City/State and Zip Code)

For further information concerning this matter, please call:

Ramon E. Vargas at (954) 434-7405
(Name of Person) (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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Ramon Vargas, hereby resign as Officer
(Title)

of A Class Medical Inc.
(Name of Corporation)

204000006972, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Ramon P. Vargas
(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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