P04000099541

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



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MResign, 11/28/12 De

TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Kidsville Pediatrics III, P.A. |
| (Name of Corporation) DOCUMENT NUMBER: P04000099541 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Francelis I. Gonzalez |
| (Name of Person) |
| Kidsville Pediatrics III, P.A. |
| (Name of Firm/Company) |
| PO Box 452223 |
| (Address) |
| Kissimmee, FL 34745 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Francelis I. Gonzalez (Name of Person) at (400) 346 3999 (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

TO:

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| L Victor M. Pantoja, J | r. , hereby resign as President | |
|---|---|--|
| ** | (Title) | |
| of Kidsville Pediatrics | III, P.A. | |
| P0400099541 (Document Number, if known) | of Corporation), a corporation organized under the laws of the State of | |
| Florida | _· | |
| Turk of | Signature of resigning officer/director) | |

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314