

09/17/2015 10:04 FAX

Division of Corporations

001/002

Page 1 of 2

**P04000122717**  
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Florida Department of State  
Division of Corporations  
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Fax Number : (850) 617-6380

From: Account Name : CARLTON FIELDS  
Account Number : 076077000355  
Phone : (813) 223-7000  
Fax Number : (813) 229-4133

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT RESIGNATION  
THOMAS A. LACY, M.D., P.A.**

Certificate of Status	0
Certified Copy	0
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*RA Resign*

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**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, CFRA, LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for Thomas A. Lacy, M.D., P.A.

(Name of Corporation)

P04000122717

(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:

Joyce F. Bentubo

(Typed or Printed Name)

Secretary

(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withdrawn corporation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

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