

PO4000 163955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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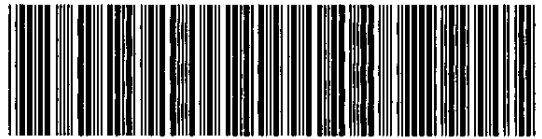
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

601016
12/10/03

12/3/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vascular Consultants, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000163955

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

Please return all correspondence concerning this matter to the following:

William P. Weatherford, Jr.
(Name of Person)

Marlowe & Weatherford, P.A.
(Name of Firm/Company)

1150 Louisiana Avenue, Suite 4
(Address)

Winter Park, Florida 32789
(City/State and Zip Code)

For further information concerning this matter, please call:

William P. Weatherford, Jr. at (407) 629-5008
(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, Nora Nelson, hereby resign as Vice President
(Title)

of Vascular Consultants, Inc.
(Name of Corporation)

P04000163955, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Nora Nelson
(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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