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Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Walk in Pick up time 2.00 Certified Copy Certificate of Status Mail out Will wait Photocopy **AMENDMENTS NEW FILINGS** Profit **∟** Amendment Not for Profit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other **Examiner's Initials** 

CR2E031(7/97)

## OFFICER/DIRECTOR RESIGNATIONED SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, JUAN M. VALIDO, hereby resign as President and Registered Office and Agent of VALIDO MEDICAL CENTER INC., a corporation organized under the laws of the State of Florida and affirm that the corporation has been notified in writing of the resignation.

Date: June 27, 2005

JUAN M. VALIDO

STATE OF FLORIDA COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledge before me this 27 days of 1000, 2005, by 1000 M. Value the incorporator, who is personally to me, or ( ) presented from 1000 Medical presented from 1000 Medi

Patricia Mena, Notary Public State of Florida at Large PATRICIA MENA
MY COMMISSION # DD 263490
EXPIRES: November 2, 2007
Bonded Thru Notary Public Underwriters

My commission Expires: