

P05000052499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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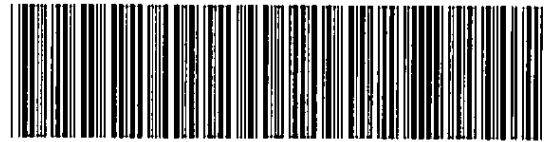
(Business Entity Name)

(Document Number)

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JUL 25 2021

I ALBRITTON

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KEY WEST URGENT CARE, INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000052499  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Teresa Hehe

\_\_\_\_\_  
(Name of Person)

KEY WEST URGENT CARE, INC.

\_\_\_\_\_  
(Name of Firm/Company)

1501 Government Rd

\_\_\_\_\_  
(Address)

Key West, FL 33040

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Teresa Hehe

\_\_\_\_\_  
(Name of Person)

at ( 305 ) 295-7550

\_\_\_\_\_  
(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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Cameo N. Hehe, hereby resign as Vice President  
(Title)

of KEY WEST URGENT CARE, INC.  
(Name of Corporation)

P05000052499, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Cameo N Hehe

(Signature of resigning officer/director)

FILED  
2021 JUN 29 AM 10:52  
TALLAHASSEE, FL  
DIVISION OF CORPORATIONS

**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