P0600006702

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
ertified Copies Certificates of Status	
	÷
Special Instructions to Filing Officer:	
Office Use Only	



09/05/12--01019--018 **175.00





COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	MEDICAL REALTY CORP.	
	(Name of Corporation)	
DOCUMENT NUMBER:	P0600006702	

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

Please return all correspondence concerning this matter to the following:

Joesph Azzata			
(Name of Person)	·		
NA			
(Name of Firm/Company)	1		
2751 NW 26th Court			
(Address)			
Boca Raton, Florida 33434			
(City/State and Zip Code)			
For further information concerning this matter	er, please call	:	
Joseph Azzata	at (561) 789-2318	
(Name of Person)	(Area C	odé & Daytime Te	lephone 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

I.

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

.

4

I.	Joseph Azzata	, hereby resign as	Director (Title)	
-,		, needy roongin as		
of		EDICAL REALTY CORP.	1	
	(Name P06000006702 (Document Number, if known)	of Corporation), a corporation organized under th	e laws of the State of	
	Florida		12 SEI Stranger MALLAH	
		Jan Ma	FILED PII PHI2: 10 INSTRUCTINE INSTRUCTINE	
		Signature of resigning officer/director)	v	

٠¢

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