

PO6000037871

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

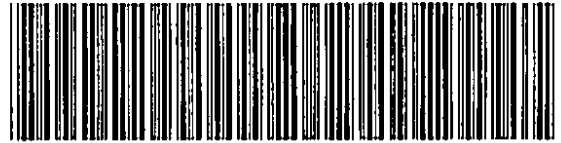
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MAR 14 2022

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2022 MAR -7 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE, FL

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RT DIAGNOSTIC INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000037871  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

ROBERTO DELGADO

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

RT DIAGNOSTIC INC

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

8415 SW 24 STREET, SUITE 203

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

MIAMI, FLORIDA 33155

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

For further information concerning this matter, please call:

ROBERTO DELGADO  
\_\_\_\_\_  
(Name of Person) at ( 305 ) 559-2121  
(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**

**FILED**  
2022 MAR -7 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, JENNIFER DELGADO, hereby resign as VICE-PRESIDENT  
(Title)

of RT DIAGNOSTIC INC  
(Name of Corporation)

P06000037871, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Jennifer Delgado  
(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