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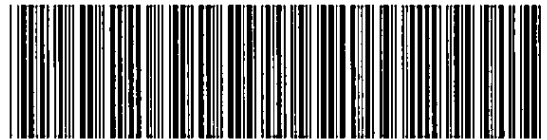
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# *McDermott & Thacker, P.A.*

*Attorneys at Law*

791 WEST LUMSDEN ROAD, BRANDON, FLORIDA 33511  
TELEPHONE (813) 684-3131 ◊ FACSIMILE (813) 654-0052

MICHAEL J. McDERMOTT  
michael.mtfirm@gmail.com

RICKY L. THACKER  
ricky.mtfirm@gmail.com

July 20, 2021

*Via Certified U.S. Mail  
Return Receipt Requested*

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Moore Clinical Research, Inc.  
Our File No.: 21-0100\SMYTH

Gentlemen:

Enclosed please find an original and a copy of Officer/Director Resignation for a Corporation and my general office account check in the amount of \$35.00 for the filing fees.

Please file the Officer/Direction Resignation and return the certified copy to this office in the self-addressed stamped envelope provided for that convenience.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

*Michael J. McDermott*

Michael J. McDermott, Esquire

MJM\dlc

Enclosures

*Dictated by Michael J. McDermott and mailed  
without his review to avoid further delay.*

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MOORE CLINICAL RESEARCH, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P06000039312

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

Please return all correspondence concerning this matter to the following:

Michael J. McDermott, Esq.

(Name of Person)

McDermott & Thacker, P.A.

(Name of Firm/Company)

791 W. Lumsden Road

(Address)

Brandon, FL 33511

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael J. McDermott, Esq.

813 684-3131

(Name of Person)

at (

(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, H. JOSEPH CARDENAS, hereby resign as PRESIDENT and DIRECTOR  
(Title)

of MOORE CLINICAL RESEARCH, INC.  
(Name of Corporation)

P06000039312  
(Document Number, if known), a corporation organized under the laws of the State of  
FLORIDA

  
(Signature of resigning officer/director)  
H. Joseph Cardenas

**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