

PO6000134616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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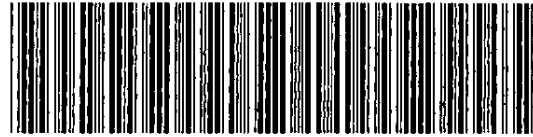
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Rebate JUL 14 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Rehab Investments of North Central Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000134616

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

Please return all correspondence concerning this matter to the following:

W. Murphy Rivenbark

(Name of Person)

Rehab Investments of North Central Florida, Inc.

(Name of Firm/Company)

5200 N.W. 43rd Street 102-261

(Address)

Gainesville, Florida, 32606

(City/State and Zip Code)

For further information concerning this matter, please call:

W. Murphy Rivenbark

(Name of Person)

at (352) 371-8301

(Area Code & Daytime Telephone 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

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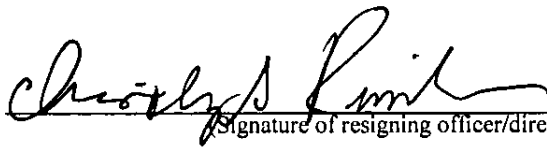
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Christopher S. Rivenbark, hereby resign as President
(Title)

of Rehab Investments of North Central Florida, Inc.
(Name of Corporation)

P06000134616, a corporation organized under the laws of the State of
(Document Number, if known)


(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