

Pol 006141437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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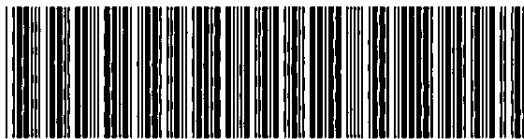
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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4/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 1, 2008

ANTONIO PRIMO
MEDEQUIP HOLDINGS, INC.
3924 NW 167 STREET
MIAMI GARDENS, FL 33054

SUBJECT: MEDEQUIP HOLDINGS, INC.
Ref. Number: P06000141437

We have received your document for MEDEQUIP HOLDINGS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to resign as officer/director for a corporation is \$35 per person resigning.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 208A00019094

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MedEquip Holdings, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000141437

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

Please return all correspondence concerning this matter to the following:

Antonio Primo

(Name of Person)

MedEquip Holdings, Inc.

(Name of Firm/Company)

3924 N.W. 167 Street

(Address)

Miami Gardens, Florida 33054

(City/State and Zip Code)

RECEIVED
2008 MAR 28 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Antonio Primo

(Name of Person)

at (305) 505 - 3070

(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

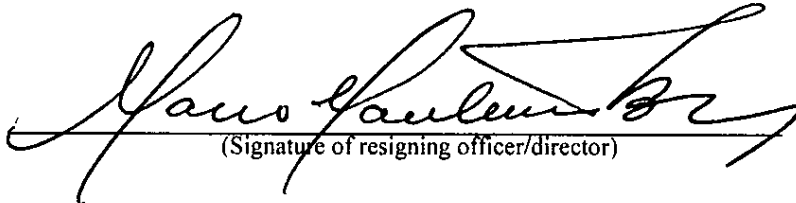
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
06 APR 14 AM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Mario M. Braz, hereby resign as Director
(Title)

of MedEquip Holdings, Inc.
(Name of Corporation)

P06000141437, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(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