P07000009447

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SECRETARY OF STATE
TALLAHASSEE, FLORID.

R.A. Rosign

C.COULLIETTE

OCT 2 2 2008

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: JAE Medical Center Inc. (Name of Corporation)
DOCUMENT NUMBER: P0700009447
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Jaime Sarmiento (Name of Person)
JAE Medical Center (Name of Firm/Company)
8660 W F/a5/er ST # 12.0 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tase Puche (Name of Person) at (305) \$51 2215 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active coor \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned,	Jaime	A	Sor	mien	to	
	(1	Name of Re	gistered Age	ent)		
hereby resigns as Registered Agent for	_ JAE	Med (Name of C	Cc/ Corporation)	Cent	te/, Inc	· r
P07000091147 (Document Number, if known)						
A copy of this resignation was mailed to	to the above list	ted corpora	ation at its	last kno	wn address.	
The agency is terminated and the office this statement is filed.	e discontinued o	on the 31st	day after	the date	on which	
If signing on behalf of an entity:	ignature of Resign	ing Agent)	5	<u></u>		
Jain	(Typed or Printed	Sa (Mie	~	SECR TALLA	3
Regis.	tase_d (Capacity)	A-3	ert		ECRETARY OF S LLAHASSEE, FLO	
\$87.50 - Ac	ng this docume tive corporation ministratively d	<u> </u>	oluntarily	i dissolve	8: 34 STATE LORIDA	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation