

PD7000031/65

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

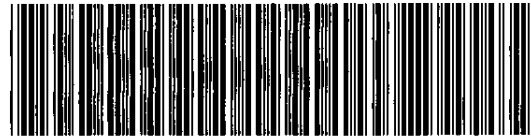
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
11 DEC 21 PM 2:50

OD/Res
@ 12/21/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Urgent Care at Sawgrass, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000031165

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

Please return all correspondence concerning this matter to the following:

Alicia Chilito
(Name of Person)

Urgent Care at Sawgrass
(Name of Firm/Company)

10220 SW 121 ST
(Address)

miami FL 33176
(City/State and Zip Code)

For further information concerning this matter, please call:

Alicia Chilito at (786) 291-0676
(Name of Person) (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**

I, Alicia Chilito, hereby resign as Director
(Title)

of Urgent Care at Sawgrass, Inc,
(Name of Corporation)

P07000031165, a corporation organized under the laws of the State of
(Document Number, if known)

FL


(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

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DIVISION OF CORPORATIONS
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