## PD7000089780

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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## **COVER LETTER**

Urgent Care of Central Florida & X-Rays Center, INC. (Name of Corporation) P07000089780 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gregoire Eugene (Name of Person) (Name of Firm/Company) 1362 SW Bayshore Blvd (Address) Port St Lucie, FL 34983 (City/State and Zip Code) For further information concerning this matter, please call: Gregoire Eugene 772 873-5213 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Street Address: Mailing Address:** Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building Post Office Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Gregoire, Eugene	, hereby resign asDirector
*,	(Title)
of_ Urgent Care of Central Florida & X-Ra	· · · · · · · · · · · · · · · · · · ·
(Name of Corpor	ation)
P07000089780 , a corp	poration organized under the laws of the State of
Florida	
Gignature	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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