

P07000123433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

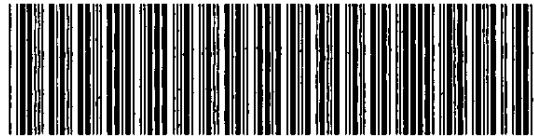
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400131479924

06/20/08--01021--013 **35.00

FILED

2008 JUN 20 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resignation

TB

6/23/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Strax Radiology, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P07000123433

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

Please return all correspondence concerning this matter to the following:

Max A. Adams, Esq.

(Name of Person)

The Law Offices of Max A. Adams

(Name of Firm/Company)

10650 Paris St.

(Address)

Cooper City, FL 33026

(City/State and Zip Code)

For further information concerning this matter, please call:

Max A. Adams, Esq.

(Name of Person)

at (305) 887-9060

(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
2008 JUN 20 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Iliana Alvarez-Ramirez, hereby resign as President
(Title)

of Strax Radiology, Inc.
(Name of Corporation)

P07000123433, 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