

PO9000035160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATE AFFAIRS
13 JUN 25 PM 10:28

CD/RES
@ 6.27.13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE RIGHT PILL PHARMACY OF BOCA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000035160

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

Please return all correspondence concerning this matter to the following:

Aplesh Patel

(Name of Person)

(Name of Firm/Company)

10845 Standing Stone Dr

(Address)

Wimauma, FL 33598

(City/State and Zip Code)

For further information concerning this matter, please call:

Alpesh Patel

(Name of Person)

at (248) 421-8267

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

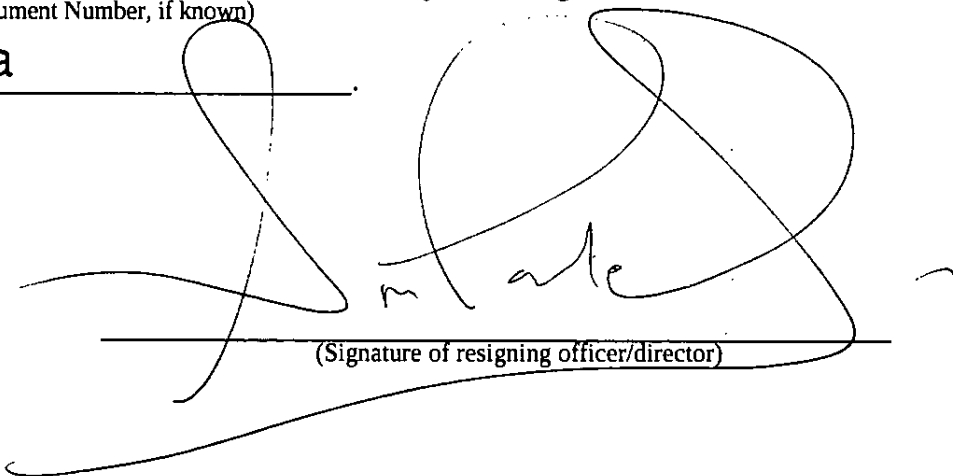
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Alpesh Patel, hereby resign as President
(Title)

of THE RIGHT PILL PHARMACY OF BOCA, INC.
(Name of Corporation)

P09000035160, 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

FILED STATE
SECRETARY OF CORPORATION
13 JUN 25 AM 10:20