

P09000058043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Res.

TBrown 11-4-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: R & R REHAB. CORP.
(Name of Corporation)

DOCUMENT NUMBER: P09000058043

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

Please return all correspondence concerning this matter to the following:

OLGA L ALDAMA

(Name of Person)

AT&N CORPORATION

(Name of Firm/Company)

370 MINORCA AVENUE, SUITE 10

(Address)

CORAL GABLES, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

OLGA L ALDAMA

(Name of Person)

at (305) 424-2410

(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
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, REINALDO SOTO, hereby resign as VICE-PRESIDENT
(Title)

of R & R REHAB CORP.
(Name of Corporation)

P09000058043, 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