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SECRETARY OF STATE
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: American Discount Pharmacy Corp. (Name of Corporation) DOCUMENT NUMBER: P09000086336
DOCUMENT NUMBER: P 0 9 0 0 00 8 6 3 3 6
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jason Carter (Name of Person)
American Discount Pharmacy Corp. (Name of Firm/Company)
110 E. Main St, Suite A
Immokalæ, FL 34142 (City/State and Zip Code)
For further information concerning this matter, please call:
Tason Carter at (239) 658-6123 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corpora

tion or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1	1509,
Florida Statutes, the undersigned, Jason Carter (Name of Registered Agent)	
hereby resigns as Registered Agent for American Discount Pharma (Name of Corporation)	ky Corp.
P 1900086336 (Document Number, if known) A copy of this resignation was mailed to the above listed corporation at its last known)	wn address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
(Signature of Resigning Agent) If signing on behalf of an entity:	DEC 17 PM 2:
Tason Carter (Typed or Printed Name)	ASS 450
Secretary and Treasurer (Capacity)	

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314