

P09000088307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts MAR 09 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pompano Beach Pain Management Inc
(Name of Corporation)

DOCUMENT NUMBER: PO 90000 88307

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

Please return all correspondence concerning this matter to the following:

Frank J. Turturo II
(Name of Person)

Pompano Beach Pain Management Inc.
(Name of Firm/Company)

1341 S. Powerline Rd
(Address)

Pompano Beach FL, 33069
(City/State and Zip Code)

For further information concerning this matter, please call:

Frank J. Turturo II at (954) 649-9312
(Name of Person) (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

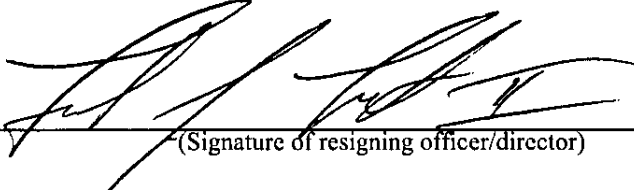
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, FRANK TURTURO II, hereby resign as President
(Title)

of POMPANO BEACH PAIN Management Inc,
(Name of Corporation)

P09000088307, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

FILED
10 MAR - 8 AM 10:57
DEPT. OF STATE
TALLAHASSEE, FLORIDA

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