

P09000103479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

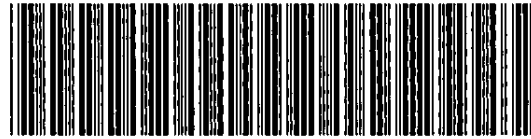
(Business Entity Name)

(Document Number)

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SECRETARY OF REVENUE

SEP 20 2012

T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TERRAMED MCR, INC.

(Name of Corporation)

DOCUMENT NUMBER: P09000103479

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

Please return all correspondence concerning this matter to the following:

JUDITH DAL FARRA

(Name of Person)

JUDITH DAL FARRA, CPA

(Name of Firm/Company)

1465 NW 97 AVE

(Address)

DORAL, FL 33172

(City/State and Zip Code)

For further information concerning this matter, please call:

JUDITH DAL FARRA at () 305-591-8787

(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, VANEZA C CARRASQUEL, hereby resign as VICE-PRESIDENT & DIRECTOR
(Title)

of TERRAMED MCR, INC.
(Name of Corporation)

P09000103479, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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