

P/0000025249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

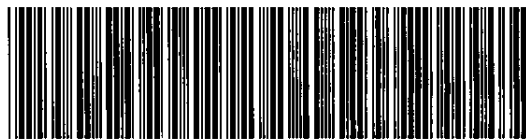
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800184833648

10/05/10--01002--015 **10.00

800184833648
08/30/10--01043--014 **25.00

FILED
2010 OCT -4 A 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off Register
Theris
10-5-10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Medevice Corporation

The enclosed Officer/Director resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Uwe Hinrichsen

(Contact Person)

Medevice Corporation

(Firm/Company)

11 NE 15 Ave,

(Address)

Pompano Beach, Fla. 33060

(City/State and Zip Code)

For further information concerning this matter, please call:

Uwe Hinrichsen

(Name of Contact Person)

at (954) 781 3050

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$35 Filing Fee

☐ ~~\$55 Filing Fee & Certified Copy~~

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 2, 2010

UWE HINRICHSEN
MEDEVICE CORPORATION
11 NE 15 AVENUE
POMPANO BEACH, FL 33060

SUBJECT: MEDEVICE CORPORATION
Ref. Number: P10000025249

We have received your document for MEDEVICE CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 910A00021065

RECEIVED

10 OCT -4, AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED

2010 OCT -4 A 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, UWE HINKRICHSEN, hereby resign as VP
(Title)

of MEDEVIC CORPORATION,
(Name of Corporation)

P1000025249, 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