

PI00000034774

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(Address)

(City/State/Zip/Phone #)

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SEC. OF STATE  
TALLAHASSEE, FL

10/12/2023

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Davila Medical Center, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P10000034774

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

Please return all correspondence concerning this matter to the following:

Jose Davila  
(Name of Person)

Davila Medical Center, Inc.  
(Name of Firm/Company)

13270 SW 8 St.  
(Address)

Miami FL 33184  
(City/State and Zip Code)

For further information concerning this matter, please call:

Milaidys Pedraza at ( 786 ) 797-1280  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Miladys Pedraja, hereby resign as Officer / Director  
(Title)

of Davila Medical Center, Inc.  
(Name of Corporation)

P10000034774, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

STATE  
TALLAHASSEE, FL

2023 OCT 16 PM 4:33

**FILED**

**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