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Of Elsign Theevis 2-25-11

COVER LETTER

SUBJECT:	Martha	M. Kat	M.D.	P.A.
		•	• ,	
DOCUMENT NUN	aber: <u> 7 0</u>	00004953	1	
The enclosed Office	r/Director Resignat	tion for a Corpo	ration and fee a	are submitted for filing
Please return all cor	respondence conce	rning this matte	r to the followi	ng:
<u>Je</u>	(Name of Person)	Esy.		·
0	Name of Firm/Comp	anv)		
· · · · · · · · · · · · · · · · · · ·	(Address)	• .		
Boya	(Address) Im Beach City/State and Zip Co	, PL 33	435	
For further informat	ion concerning this	matter, please	call:	
Jeff Tomb	ne of Person)	at (at (1 737 a Code & Daytin	- 13 4 5 ne Telephone Number)
Enclosed is a check	for \$35.00 made ங	avable to the Flo	orida Denartme	nt of State

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section **Division of Corporations**

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Lori-N	lan Kaye	, hereby resi	gn as Vic-President	& Suretary
	•			(Title)
of	Martha	M. KATO	MD PA	,
	(Name of C	Corporation) /	,	
P10000049531 (Document Numbe	r. if known)	a corporation organiz	zed under the laws of	the State of
Florida				
	Low	No Koje	_	
	(Sign	ature of resigning office	r/director)	TB 24 A
	FIL	ING FEE IS \$35.00)	q: No

Make checks payable to Florida Department of State and mail to:

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