## P11000018685

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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Off Resign

NOV 9 2012

T. LEWIS

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Medical Exchange, Inc (Name of Corporation)  DOCUMENT NUMBER: P11000018685
DOCUMENT NUMBER: 1 110000 10000
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rashida Biggs
(Name of Person)
(Name of Firm/Company)
19680 NW 82nd Ct
(Address)
Miami, FL 33015
(City/State and Zip Code)
For further information concerning this matter, please call:
Rashida Biggs (Name of Person)  at (305) 218-4529 (Area Code & Daytime Telephone Number)
(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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

## FILED

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2012 NOV -7 PM 4: 32

SLORETARY OF STATE TALLAHASSEE, FLORIDA

Rashida Biggs	, hereby resign as CEO
)	(Title)
<sub>s</sub> Medical Exchange	
P11000018685  (Document Number, if known)	ne of Corporation), a corporation organized under the laws of the State of
Florida	<del></del>
y e	
	(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