

P/2000017239

(Requestor's Name)

(Address)

(Address)

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TALLAHASSEE, FLORIDA

5-18-12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MEDICINE ON WHEELS CORP.
(Name of Corporation)

DOCUMENT NUMBER: P12000017239

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

Please return all correspondence concerning this matter to the following:

MARIA N. AYRES

(Name of Person)

MEDICINE ON WHEELS CORP

(Name of Firm/Company)

11534 WOODMOUNT LANE

(Address)

ESTERO, FL. 33928

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA N. AYRES

(Name of Person)

at (239) 298 2919

(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**

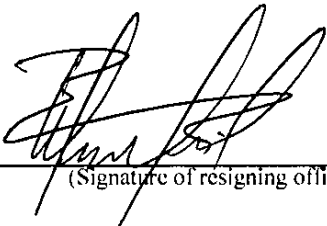
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, EDUARDO E. WIENER, hereby resign as VICE PRESIDENT
(Title)

of MEDICINE ON WHEELS CORP
(Name of Corporation)

P12000017239, 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