

P 12000053440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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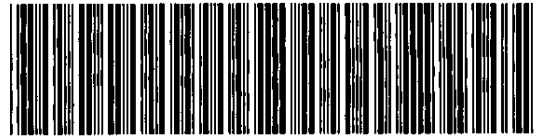
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Premier Clinical Research Institute
(Name of Corporation)

DOCUMENT NUMBER: P12000053440

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

Please return all correspondence concerning this matter to the following:

Michael C. Piercey, MD
(Name of Person)

Premier Clinical Research Institute
(Name of Firm/Company)

3100 NW 72nd Avenue Suite 125
(Address)

Miami, Florida 33122
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael C. Piercey at (305) 392-0279
(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Daniel DIAZ-Alejo, hereby resign as Secretary
(Title)

of Premier Clinical Research Institute, Inc.
(Name of Corporation)

P12000053440, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Daniel Diaz-Alejo
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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