

PI 3000618507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

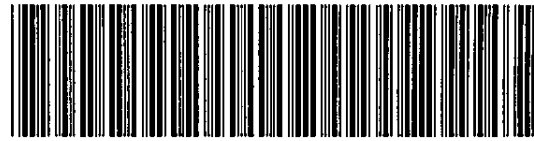
(Business Entity Name)

(Document Number)

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T. Lemieux
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mount Sinai Urgent Care Inc
(Name of Corporation)

DOCUMENT NUMBER: P13000018507

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Roland Brutus
(Name of Person)

Mount Sinai Urgent Care Inc
(Name of Firm/Company)

2250 Lee Rd., Suite 200
(Address)

Winter Park, FL 32789
(City/State and Zip Code)

For further information concerning this matter, please call:

Roland Brutus at (321) 960-8209
(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, Roland Brutus, hereby resign as President
(Title)

of Mount Sinai Urgent Care Inc.
(Name of Corporation)

P13000018507, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director)

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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