

P14000048596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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DIVISION OF CORPORATIONS  
16 FEB 16 PM 3:51

FEB 17 2016

C LEWIS

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GLADES DRUGS, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P14000048596

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

Please return all correspondence concerning this matter to the following:

**MIKE SCHWEIGER**

(Name of Person)

**GLADES DRUGS, INC.**

(Name of Firm/Company)

**1095 BROKEN SOUND PKWY, NW STE 300**

(Address)

**BOCA RATON, FL 33432**

(City/State and Zip Code)

For further information concerning this matter, please call:

**MIKE SCHWEIGER** at **(561) 330-6666**  
(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

GD

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

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DIVISION OF CORPORATIONS

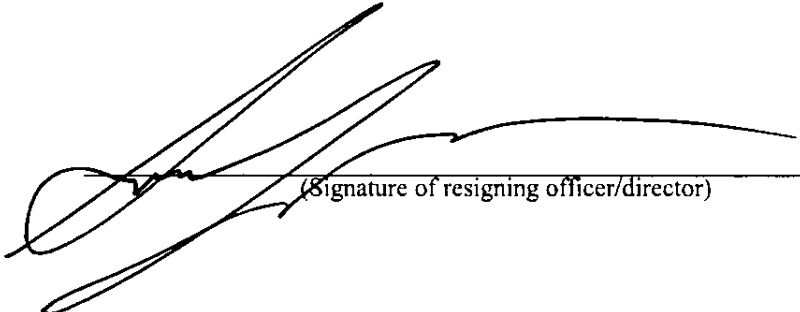
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I, SANTO LEO, hereby resign as VICE PRESIDENT  
(Title)

of GLADES DRUGS, INC.  
(Name of Corporation)

P14000048596, 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:**

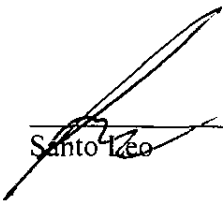
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS

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**RESIGNATION OF SANTO LEO**

I, Santo Leo, hereby resign from all positions and designations of Glades Drugs, Inc., a Florida corporation, including, without limit, positions as employee, officer and director, effective as of the 8th day of February, 2016.



Santo Leo