

P17000013520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

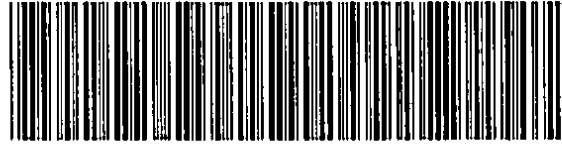
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100308405311

02/05/18--01012--012 ++35.00

FILED  
18 FEB -5 PM 3:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 06 2018  
3:00:00

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** UNITED RESEARCH ALLIANCE OF SOUTH FLORIDA, CORP.  
(Name of Corporation)

**DOCUMENT NUMBER:** P17000013826

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

Please return all correspondence concerning this matter to the following:

**LLina M Milian**

(Name of Person)

(Name of Firm/Company)

**10261 SW 156 Street**

(Address)

**Miami, FL 33157**

(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(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, LLina M Milian, hereby resign as PRES  
(Title)

of UNITED RESEARCH ALLIANCE OF SOUTH FLORIDA, CORP.  
(Name of Corporation)

P17000013826, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

FILED  
18 FEB -5 PM 3:56  
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