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## REGISTERED AGENT RESIGNATION PMC MEDICAL CENTER, INC.

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RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIBA

Pursuant to the pro-	visions of sections 607.0					509,
Florida Statutes, the	undersigned,	Soni	a 1	Ken	Te r	1,D
hereby resigns as R	cgistered Agent for	PMC	Ned		enter	Inc
P930000	122765	(	Name of	Corporation)	,	
	unber, if known)					
A copy of this resig	nation was mailed to the	above listed	d corpora	ation at its l	ast know	n address.
The agency is termi this statement is file		continued on	<b>&gt;</b>	day after t	he date or	n which
If signing on behalf		ac or reasgain	B. r.Bouri			
a signing on benan	or an entity.					
	(Турс	ed or Printed No	ame)			
_		(Ci)				
		(Capacity)				

Fee for filing this document:

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Make checks payable to Florida Department of State and mall to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314