

P93000053957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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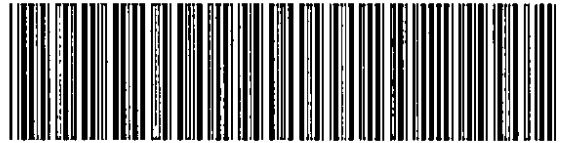
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GREATER MIAMI NEPHROLOGY ASSOCIATES, P.A.

(Name of Corporation)

DOCUMENT NUMBER: P93000053957

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

Please return all correspondence concerning this matter to the following:

Lawrence F. Michelson, Esq.

(Name of Person)

Lawrence F. Michelson, P.A.

(Name of Firm/Company)

10301 SW 69th Ave.

(Address)

Miami, FL 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence F. Michelson

at (305) 661-8929

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Carl Goldsand, hereby resign as President and Director
(Title)

GREATER MIAMI NEPHROLOGY ASSOCIATES, P.A.
of _____
(Name of Corporation)

P93000053957
_____, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

afg Sep 3, 2020
(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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