# P94000046324

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u></u>		

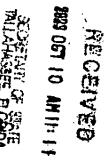
Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 026168 8347462
AUTHORIZATION: Come Sena
COST LIMIT : \$ 87.50 35.00
ORDER DATE : October 2, 2023
ORDER TIME : 8:58 AM
ORDER NO. : 026168-005
CUSTOMER NO: 8347462
CHANGE OF AGENT
NAME CERTIFICATION CROWN TWO
NAME: STERLING MEDICAL GROUP, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER:

#### **COVER LETTER**

Division of Corporations	
SUBJECT: Sterling Medical Group, Inc.	
(Name of Corporal	tion)
DOCUMENT NUMBER: P94000046324	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
RESIGNATION DEPARTMENT	
(Name of Person)	<del>-</del>
CORPORATION SERVICE COMPANY	
(Name of Firm/Company)	_
251 LITTLE FALLS DRIVE	
(Address)	<del>-</del>
WILMINGTON, DE 19808	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
RESIGNATION DEPARTMENT 800 at (	927-9801
(Name of Person) (Area Code	e & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

# 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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2023

CSC

SUBJECT: STERLING RADIOLOGY, INC.

Ref. Number: P94000046324

Please give original
We have received your document for STERLING RADIOLOGY, AINC, and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the current name of the Corporation.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 423A00023539

www.sunbiz.org

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	CORPORATION SERVICE COMPANY	
Trotted Statetos, the anatorighte,	(Name of Registered Agent)	
hereby resigns as Registered Ager	nt for STERLING RADIOLOGY, INC.	
nereby resigns as registered reger	(Name of Corporation)	
P94000046324		
(Document Number, if known)	<del></del>	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.	
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on which  Eyliva Baker  Assistant Vice Provident	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:	KER (Typed or Printed Name)	
BY EYLIENA BA	KER AS	
	(Typed or Printed Name)	•
VICE PRESIDENT	<u> </u>	
	(Capacity)	

Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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