

P94000078860

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMERICAN MEDICAL INC.
(Name of Corporation)

DOCUMENT NUMBER: P94000078860

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

Please return all correspondence concerning this matter to the following:

Bonny Dyer
(Name of Person)

American MEDICAL INC
(Name of Firm/Company)

1822 OLD OKEECHOBEE Rd # B
(Address)

WEST Palm BEACH, FL 33409
(City/State and Zip Code)

For further information concerning this matter, please call:

Bonny Dyer at (561) 478 2488
(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
409 E. Gaines Street
Tallahassee, FL 32399


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I CHRISTOPHER Burdett, hereby resign as President
(Title)

of American Medical Inc
(Name of Corporation)

P94000078860, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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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