

P 94000083129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SUP. COURT OF STATE
TALLAHASSEE, FL

C. GOLDEN

DEC - 6 2018

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNLIFE PEDIATRIC NETWORK, INC.
(Name of Corporation)

DOCUMENT NUMBER: P94000083129

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

Please return all correspondence concerning this matter to the following:

Amy J. Galloway, Esq.
(Name of Person)

Amy J. Galloway, P.A.
(Name of Firm/Company)

The Tides, Suite 226, 3020 NE 32nd Avenue
(Address)

Fort Lauderdale, FL 33308
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy J. Galloway at (954) 315-4887
(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

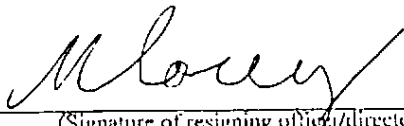
OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, Shirley E. Campbell-Mogg, hereby resign as Vice-President
(Title)

of SUNLIFE PEDIATRIC NETWORK, INC.
(Name of Corporation)

P94000083129, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

DEPARTMENT OF STATE
TALLAHASSEE, FL

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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