

P95000051533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Jorge C. Gachassin-Lafite, hereby resign as Director  
(Title)

of FLORIDA PROFESSIONAL DME, CO.  
(Name of Corporation)

P95000051533, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

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