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L. Gregory Loomar, P.A.
1152 North University Drive
Suite 201
Pembroke Pines, Florida

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

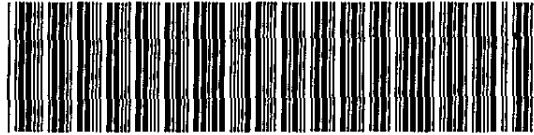
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE, SECRETARY OF STATE

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617,0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, **L. GREGORY LOOMAR, ESQUIRE** hereby resigns as Registered Agent for **AMERICAN MEDICA-PHARMA CORPORATION.**

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of resigning agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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TALLAHASSEE, FLORIDA

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