

P96000053286

Requestor's Name

Address

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FedEx USA Airbill FedEx Tracking Number 8132 0146 5870

Use Only

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1 From This portion can be removed for Recipient's records.

Date 8/2/99 FedEx Tracking Number 813201465870

Sender's Name Robert M. Mayer Phone 305 668-4433

Company PEARSON & MAYER PA

Address 1320 S. DIXIE HWY STE 811

City MIAMI State FL ZIP 33146

2 Your Internal Billing Reference RMM-P (Tenn)

RECIPIENT: PEEL HERE

FILED
99 AUG -3 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-08/03/99-01067-001
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\$35
Col ADRES
OHPD
KRG
8-3

Examiner's Initials

OFFICER / DIRECTOR RESIGNATION

FILED
99 AUG - 3 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Steven J. Getter, hereby resign as President, Officer & Director
(Title)

of TRI-COUNTY HEALTHCARE NETWORK, INC.
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.


(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

STEVEN J. GETTER
10038 Vestal Place
Coral Springs, Florida 33071

TO WHOM IT MAY CONCERN:

I, STEVEN J. GETTER, hereby resign from my capacity as officer, director or registered agent, if any, of TRI-COUNTY HOME HEALTH CARE SERVICES, INC. (G08068); TRI-COUNTY SPECIALTY MEDICAL EQUIPMENT & SUPPLIES, INC. (V03258); and TRI-COUNTY PEDICARE, INC.; TRI-COUNTY HEALTHCARE NETWORK, INC. (P96000053286); effective immediately.

I also give notice that I have no position as employee, officer or director of any of the above and have not been paid by them since February, 1999 and was informed quite some time back that I would be replaced in any capacity I held at that time. My last known address to contact the officers and directors of the companies was Lars Thurman, 15912 Wyndover Road, Tampa Florida 33647 and William Tapella, 13923 Peperell Drive, Tampa, Florida 33624.

I have not been the President of any of those entities since March 31, 1999.


STEVEN J. GETTER

STATE OF FLORIDA)

COUNTY OF ~~MIAMI-DADE~~)
Broward

The foregoing instrument was acknowledged before me this 5th day of May, 1997, by STEVEN J. GETTER, who is personally known to me or who has produced as identification and who did not take an oath.

Printed/Typed Name: *Susan C. Pitruzzella*
Notary Public-State of Florida

Susan C. Pitruzzella

My Commission Expires:

6/23/01

(NOTARY SEAL)

