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TALLAHASSEE, FLORING

COVER LETTER

SUBJECT: Welch & McLoy Therapy Service	s, PA		
(Name	e of Corporation)		
DOCUMENT NUMBER: P96000	P96000076440		
The enclosed Officer/Director Resignation for a C	Corporation and fee are submitted for filing		
Please return all correspondence concerning this r	natter to the following:		
Richard J. McLoy			
(Name of Person)			
Welch & McLoy Therapy Services, PA			
(Name of Firm/Company)			
6926 Hills Drive			
(Address)			
New Port Richey, FL 34653			
(City/State and Zip Code)			
For further information concerning this matter, ple	ease call:		
Richard J. McLoy	727 848-6747		
(Name of Person)	727 848-6747 (Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made payable to th	e Florida Department of State.		
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Add Amendment Division of C Post Office E Tallahassee,	Section Corporations Box 6327		

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ON 10 DEC 17 PM 12: 24

SECRETAR OF STATE
TALLAHASSEE, FLORIDA

I, Margaret A. McLoy	, hereby resign as_	President
1,		(Title)
of Welch & McLoy Therapy Services, P.	\	
(Name of Corpor	ration)	
P9600076440 ,a corr (Document Number, if known)	ooration organized ur	nder the laws of the State of
Florida		

FILING FEE IS \$35.00

Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314