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COVER LETTER

Alejandro Enrique Casuso & Gladys Yolanda Alonso, MD, PA (Name of Corporation) P97000049893 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: GLADYS Y ALONSO, MD (Name of Person) Alejandro E Casuso & Gladys Y Alonso, MD, PA (Name of Firm/Company) 1435 W 49 PLACE, SUITE 601 (Address) Hialeah, FL 33012 (City/State and Zip Code) For further information concerning this matter, please call: GLADYS Y ALONSO, MD (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address:
Amendment Section
Division of Corporations **Mailing Address:** Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION AND THE STATE OF THE STATE

I, ALEJANDRO ENRIQUE CASUSO	, hereby resign as PRESIDENT / DIRECTOR	
	(Title)	
of ALEJANDRO ENRIQUE CASUSO & G		
•	•	
(Document Number, if known), a corpor	ration organized under the laws of the State of	
FLORIDA		
A. e	Myo MO	
(Signature of resigning officer/director)		

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