P9700052276

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Carolina Rehab, Inc. (Name of Corporation)	ation)
DOCUMENT NUMBER: P97000052276	
The enclosed Officer/Director Resignation for a Corporation	and fee are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
Cathy J. Lerman	
(Name of Person)	73.50 S
Carolina Rehab, Inc.	03 SEP 22 PH 2: 55 TALLAHASSEE, FLORI
(Name of Firm/Company)	ASSE
1501 NW 49 Street, Suite 200	FIG. 12
(Address)	SE S
Ft. Lauderdale, FL 33309	De la companya de la
(City/State and Zip Code)	
For further information concerning this matter, please call:	
William Guthrie at (954 (Area Code	938-3770 & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida I	Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L. Cathy J. Lerman	, hereby resign as Secretary	÷
	(Title)	,
of Carolina Rehab, Inc.	Corporation)	
P07000052276	a corporation organized under the laws of the State of	
Florida		
Sign	ature of resigning officer/director) FILED SEE FLOX	

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

FILING FEE IS \$35.00

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