

P97000053579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

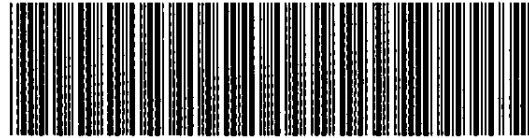
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800212032708

09/15/11--01005--001 **35.00

SEP 15 PM 12:39
RECEIVED
FBI - BOSTON

SEP 15
FBI - BOSTON

OD
9/16/11
TK

From:

09/09/2011 09:42

#349 P.011/012

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A FIRST CHOICE HEALTHCARE SYSTEMS, INC.

(Name of Corporation)

DOCUMENT NUMBER: P97000053579

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LUIS CORTES D.O.

(Name of Person)

A FIRST CHOICE HEALTHCARE SYSTEMS, INC.

(Name of Firm/Company)

4691 S UNIVERSITY DRIVE

(Address)

DAVIE, FL 33328

(City/State and Zip Code)

For further information concerning this matter, please call:

NICOLE WILSON

(Name of Person)

at (954) 358-2790

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

From:

09/09/2011 09:42

#349 P.012/012

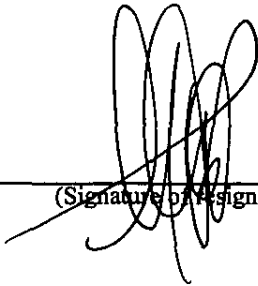
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LUIS CORTES D.O., hereby resign as OFFICER/DIRECTOR
(Title)

of A FIRST CHOICE HEALTHCARE SYSTEMS, INC.,
(Name of Corporation)

P97000053579, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

RECEIVED
FALL 15 2011
FALL 15 2011

14 SEP 15 PM 12:39

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