

P97000088009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

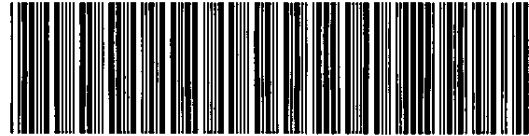
(Business Entity Name)

(Document Number)

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14 SEP 19 PM 1:06  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

C. Lewis  
9-26-14

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FISS, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P97000088009

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

Please return all correspondence concerning this matter to the following:

Natalie Frazier

(Name of Person)

Florida Orthopaedic Institute

(Name of Firm/Company)

13020 N Telecom Pkwy

(Address)

Temple Terrace, FL 33637

(City/State and Zip Code)

For further information concerning this matter, please call:

Natalie Frazier

(Name of Person)

at ( 813 ) 978-9700 x7397

(Area Code & Daytime Telephone Number)

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

**Mailing Address:**

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

**Street Address:**

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

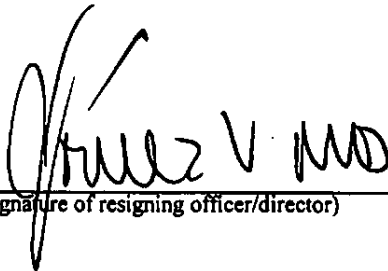
14 SEP 19 PM 1:06

I, Jose Gomez, MD, hereby resign as Director  
(Title)

of FISS, Inc  
(Name of Corporation)

P97000088009, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(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