P97000088009

(Red	questor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800269618648

02/27/15--01020--005 **35.00

15 MAR -2 PM 3: 41

MAR 0 6 2015 T. CARTER

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

Temple Terrace, FI 33637

(City/State and Zip Code)

For further information concerning this matter, please call:

Natalie Frazier

at (813) 978-9700 x7397 (Area Code & Daytime Telephone Number)

(Name of Person)

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

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 MAR -2 PM 3:41

_r Philip M Davidson, I	MD, hereby resign as Director
.,	(Title)
of FISS, Inc	
	of Corporation)
P97000088009	_, a corporation organized under the laws of the State of
(Document Number, if known)	
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