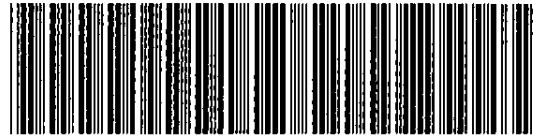


P98000059341



400200643054

04/06/11--01022--022 **352.50

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entry Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

FILED

11 APR -6 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RAB
CAG
4/12

CFRA, LLC
REGISTERED AGENT SERVICES
A SUBSIDIARY OF CARLTON FIELDS

Corporate Center Three at International Plaza
4221 W. Boy Scout Blvd, 10th Floor
Tampa, Florida 33607-5736

Mailing Address:
P. O. Box 3239
Tampa, Florida 33601-3239
Tel (813) 223-7000 Fax (813) 229-4133

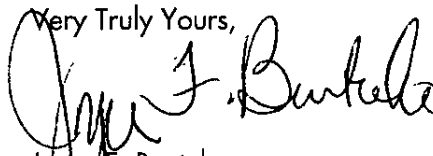
April 4, 2011

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

Re: RESIGNATION OF REGISTERED AGENT –
BOCA C&G RE LLC
BUCKLEY REALTY, INC
FANTASY TAN, INC.
J SCOTT DONALD & ASSOCIATES, LLC
OAKWOOD CAPITAL, LLC
P.M.N.C. UROLOGY RESEARCH CENTER OF SOUTH FLORIDA, INC.

Gentlemen:

Please find enclosed Resignation of Registered Agent forms for the above referenced entities. Also enclosed is Carlton Fields' Check No. 502992 totaling \$352.50 for the filing fees for these entities.

Very Truly Yours,

Joyce F. Bentubo
Secretary

JFB/kmt
Enclosures

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, CFRA, LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for P.M.N.C. Urology Research Center of South Florida,
(Name of Corporation) Inc.

P98000059341

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.

Joyce F Bentubo
(Signature of Resigning Agent)

If signing on behalf of an entity:

Joyce F Bentubo

(Typed or Printed Name)

Secretary

(Capacity)

FILED
11 APR - 6 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314