## Requester's Name HEALTH FINANCIAL SERVICES 2455 SW 27TH AVE., STE 120 MIAMI, FL 33145 Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) 400003342254--08/01/00--01070--001 \*\*\*\*\*35.00 \*\*\*\*\*35.00 (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time \_ Certificate of Status ☐ Photocopy Will wait ■ Mail out AMENDMENTS **NEW FILINGS** Amendment ☐ Profit Resignation of R.A., Officer/Director ☐ Not for Profit ☐ Change of Registered Agent Limited Liability ☐ Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION OTHER FILINGS Annual Report ☐ Fictitious Name ☐ Limited Partnership Reinstatement Trademark 2000 Other

Examiner's Initials

CR2E031(7/97)



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 19, 2000

HEALTH FINANCIAL SERVICES 2455 SW 27TH AVE., STE 120 MIAMI, FL 33145

SUBJECT: HEALTH FINANCIAL SERVICES, INC.

Ref. Number: P98000092777

We have received your document for HEALTH FINANCIAL SERVICES, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file your document is \$35.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6908.

Anna Chesnut Corporate Specialist

Letter Number: 200A00028551

Of resign



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

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## OFFICER / DIRECTOR RESIGNATION

I, Maria C. Perez, hereby resign as President (Title)
(Title)
of Health Financial Services Inc. (Name of Corporation)
(Name of Corporation)
a corporation organized under the laws of the State of
and affirm that the corporation has been notified in writing of the resignation.
ONG DELLE
(Signature of resigning officer/director)