

P99000001057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

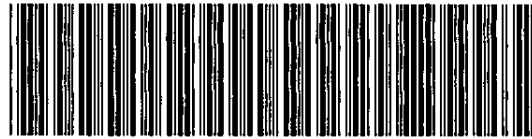
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800241960918

11/21/12--01018--024 **140.00

FILED
12 NOV 21 PM 3:36
RECEIVED
NOV 21 2012
FILING OFFICE

O/D

Design.

11/28/12

DC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kidsville Pediatrics I, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P99000001057

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

Please return all correspondence concerning this matter to the following:

Francelis I. Gonzalez
(Name of Person)

Kidsville Pediatrics I, P.A.
(Name of Firm/Company)

PO Box 452223
(Address)

Kissimmee, FL 34745
(City/State and Zip Code)

For further information concerning this matter, please call:

Francelis I. Gonzalez at (407) 346 8955
(Name of Person) (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
409 E. Gaines Street
Tallahassee, FL 32399

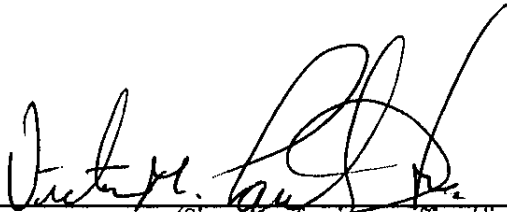
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Victor M. Pantoja, Jr., hereby resign as President
(Title)

of Kidsville Pediatrics I, P.A.,
(Name of Corporation)

P99000001057, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director)

FILED
12 NOV 21 PM 3:34
TALLAHASSEE, FLA.

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