

AUG-06-01

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FROM: AKERMAN, SENTERFITT

904-798-3730

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Florida Department of State

Division of Corporations

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From:

Account Name : AKERMAN, SENTERFITT OF JACKSONVILLE

Account Number : 105543000740

Phone : (904) 798-3700

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REGISTERED AGENT RESIGNATION

ASTHETIC AND PLASTIC SURGERY CENTER OF JACKSONVILLE,

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RA Resignation

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AUG-06-01 08:52AM FROM-AKerman SENTERFITT

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RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 607.0502(2), Florida Statutes, the undersigned, Motolaw, Inc., hereby resigns as Registered Agent for **ASTHETIC AND PLASTIC SURGERY CENTER OF JACKSONVILLE, P.A.**, a Florida corporation.

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.

Dated the 6th day of August, 2001

Motolaw, Inc.


By: Robert G. Shaffer, II, President

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