

P99000070136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

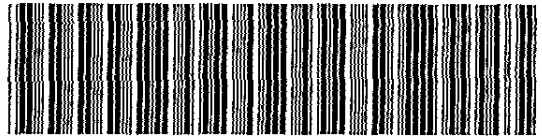
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000038323830

07/13/04--01011--002 \*\*35.00

FILED  
04 JUL 13 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0/0 resig

7/5

7/20

*W. Morgan Speer*  
*Attorney at Law*  
*A Professional Association*  
*1800 Australian Avenue South, Suite 100*  
*West Palm Beach, Florida 33409*

*Telephone:* (561) 655-9478

*Facsimile:* (561) 655-9479

July 7, 2004

**VIA U.S. CERTIFIED MAIL #7001 1140 0001 6906 1562**

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

Re: Society of Free Standing Hyperbaric Oxygenation Centers, Inc.  
Document No: P99000070136

Dear Sir or Madam;

Enclosed please find the following items related to the above referenced corporation:

1. Transmittal Letter;
2. Officer/Director Resignation; and
3. Check Number 3847 in the amount of \$35.00 representing payment of the filing fee.

If you have any questions or concerns regarding this matter, please do not hesitate to contact me.

Sincerely,

*W. Morgan Speer*  
W. Morgan Speer

WMS/cs  
Enclosures

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Society of Free Standing Hyperbaric Oxygenation Centers, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000070136

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

Please return all correspondence concerning this matter to the following:

Cindy Speer

(Name of Person)

c/o W. Morgan Speer, P.A.

(Name of Firm/Company)

1800 Australian Avenue South, Suite 100

(Address)

West Palm Beach, Florida 33409

(City/State and Zip Code)

For further information concerning this matter, please call:

W. Morgan Speer

(Name of Person)

at ( 561 )

655-9478

(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**

FILED  
04 JUL 13 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Cindy R. Speer, hereby resign as Director  
(Title)

of Society of Free Standing Hyperbaric Oxygenation Centers, Inc.  
(Name of Corporation)

P99000070136, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Cindy R. Speer  
(Signature of resigning officer/director)

**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