P99000090104

| (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: |
| |
| |
| |







600008484936

10/22/02--01030--009 **35.00

)2 OCT 22 PH 12: 55 ECRETARY OF STATE

LUCIO, BRONSTEIN, GARBETT, STIPHANY & ALLEN

PROFESSIONAL ASSOCIATION ATTORNEYS AT LAW

BRICKELL BAYVIEW CENTRE, SUITE 3 100

80 Southwest Eighth Street, Miami, Florida 33130

TELEPHONE (305) 810-2831 • TELEFAX (305) 579-4722 • E-MAIL: JSOTOLONGO@LBGSLAW.COM

VIA U.S. MAIL

October 16, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida

RE: RESIGNATION OF OFFICER

Dear Sir or Madam:

We are enclosing an Officer/Director Resignation form for Medwest Professional Center, Inc., a Florida corporation. We are also enclosing check number 4333 for \$35.00 to cover the filing fees.

Your attention to this matter is appreciated. If you have any questions, please do not hesitate to contact us.

Very truly yours,

LUÇIO, BRONSTEIN, ET. AL.

JULIA SOTOLONGÓ, ESO.

Enclosures

G:\BRICENO\Medwest\FL Dept of State.resignation.ltr.doc

02 OCT 22 PH I2: 55 SECRETARY OF STATI



OFFICER / DIRECTOR RESIGNATION

| I, DOUGLAS BRICENO | hereby resign as President, Director and Secretary |
|--|--|
| | (litte) |
| of MEDWEST PROFESSIONAL CENTER, | INC. |
| (Name of Corporation | , |
| a corporation organized under the laws of the State | of FLORIDA |
| and affirm that the corporation has been notified in | writing of the resignation. |
| Cionatura of rea | signing officer/director) |

FILING FEE IS \$35.00

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