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(Re	questor's Name)	
(Ad	dress)	
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(Cít	y/State/Zip/Phone	e #)
PICK-UP	TIAW [	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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## March 16, 2004

From: Patricia Collins

4231 West Commercial Boulevard

Tamarac, Florida 33319

To: Florida Department of State Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

ATTN: Corporate Specialist Supervisor

Re: BRANIER ORTHOPEDIC CARE CENTER, INC. Resignation as President by Patricia Collins

Dear Ms. Lewis:

Enclosed please find the following for filing:

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- 1. Resignation as Officer and President, and
- 2. Check number  $\frac{1760}{}$  in the amount of \$35.00 for the resignation filing.

Thank you for your kind help in this matter, I remain.

Sincerely

Patricia Collins

## RESIGNATION

Gentlemen:

I, PATRICIA COLLINS, hereby tender my resignation as Director and President of BRANIER ORTHOPEDIC CARE CENTER, INC., a Florida Corporation, to take effect at the conclusion of the meeting of the Board Of Directors, at which time the resignation is accepted.

DATED: 3-16, 2004.

Patricia Collins as Director and President

