

V49978

LAW OFFICES OF
LEWIS G. GORDON
GABLES ONE TOWER
1320 SOUTH DIXIE HIGHWAY, SUITE 700
CORAL GABLES, FLORIDA 33146

000002584230--3
-07/09/98-01042-018
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____
- ☐ Mail out ☐ Will wait ☐ Photocopy

- ☐ Certified Copy
- ☐ Certificate of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUL -9 AM 9:29

APPROVED
AND
FILED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

OK
V49978
7-9-98
288

Examiner's Initials

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Lewis G. Gordon, Esq.,
(Name of registered agent)

hereby resigns as Registered Agent for East Boca Medical Management, Inc.,
(Name of 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.


(Signature of resigning agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUL -9 AM 9:29

APPROVED
AND
FILED

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation