

P96000082518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

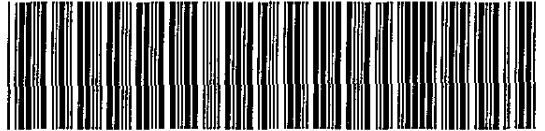
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Scintillate Manufacturing Co.
(Name of Corporation)

DOCUMENT NUMBER: P 96000082518

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Vadim Karapetyan
(Name of Person)

Scintillate Manufacturing Co
(Name of Firm/Company)

15455 West Dixie Hwy #14
(Address)

North Miami Beach FL 33162
(City/State and Zip Code)

For further information concerning this matter, please call:

Vadim Karapetyan at (305) 588 3100
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Vadim Karapetyan, hereby resign as PSTD
(Title)

of Scintillate Manufacturing Co
(Name of Corporation)

P 96000082518, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

[Signature]
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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