11/18/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Fifting Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		
		 	 _

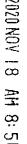
## REGISTERED AGENT RESIGNATION MEDIDAMETRICS, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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

Florida Statutes, the undersigned, CT CORPORATION SYSTEM	
(Name of Registered Agart)	
hereby resigns as Registered Agent for MEDIDAMETRICS, INC.	
(Name of Corporation)	
F11000002219	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last kno	own address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
Kielagfag	
(Signature of Resigning Agert)	
If signing on behalf of an entity:	2020 NOV 18
Kimberly Laughrey	31 A0
(Typed or Printed Narc)	A.
ASSISTANT SECRETARY	25 25 27
(Capariy)	- 4

## Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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