

F3 1900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

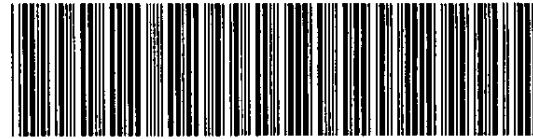
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800303807548

09/25/17--01008--008 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

24 SEP 25 AM 10:28

FILED

OD/Res

SEP 26 2017

I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DIRECTOR RESIGNATION FOR A CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: 592087781

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SIMON VAINSTEIN

(Name of Person)

PHARMATECH USA CORP

(Name of Firm/Company)

3500 MYSTIC POINTE DR. APT. 1705

(Address)

AVENTURA, FL 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

SIMON VAINSTEIN

(Name of Person)

at (786) 973 0933

(Area Code & Daytime Telephone Number)

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

Mailing Address:


Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SIMON VAINSTEIN, hereby resign as DIRECTOR
(Title)
U.S. A.
of PHARMATECH ~~USA~~ CORP
(Name of Corporation)
59 208 7781 F31900, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

FILED
20 SEP 25 AM 10:28
SECRETARY OF STATE
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