

F9800000 14/39

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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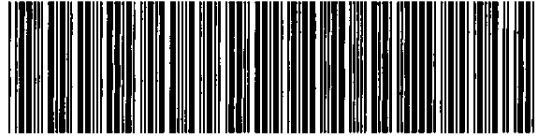
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NU-MED, USA, INC.

(Name of Corporation)

DOCUMENT NUMBER: F98000001439

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

Please return all correspondence concerning this matter to the following:

Jason K. Psaltides, Esq.

(Name of Person)

Jason K. Psaltides, PA

(Name of Firm/Company)

14101 NW 4th Street

(Address)

Sunrise, FL 33325

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason K. Psaltides, Esq.

(Name of Person)

at (954) 845-9500

(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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, James B. Riley, hereby resign as D, P, S, T
(Title)

of NU-MED, USA, INC.
(Name of Corporation)

F98000001439, a corporation organized under the laws of the State of
(Document Number, if known)

Nevada


(Signature of resigning officer/director)

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

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TALLAHASSEE, FLORIDA

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