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Requester's Name

Tracy Tatum
555 NE. 34th St. Apt. 505
Miami, FL 33137

Office Use Only

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

1. _____ (Corporation Name) _____ (Document #) **800006464408--3**
-07/17/02--01032--010
*****35.00 *****35.00
2. _____ (Corporation Name) _____ (Document #)
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☒ Resignation of R.A. **Officer/Director**
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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Examiner's Initials

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TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION

I, TRACY TATUM, hereby resign as Vice President/Director
(Title)
of Emergency Medical Training Institute Inc.
(Name of Corporation)
a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

Tracy Tatum
(Signature of resigning officer/director)

FILING FEE IS \$35.00

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