

N 080000001282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

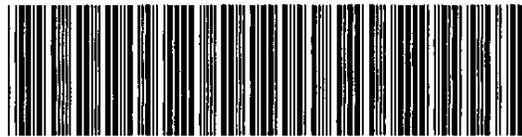
(Business Entity Name)

(Document Number)

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500273045545

*Resignation of officer*

05/26/15--01018--007 \*\*35.00

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2015 MAY 26 PM 2:02

FILED

*DR*  
*5/29/15*

TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Hydroblades, Inc  
(Name of Corporation)

DOCUMENT NUMBER: NO8 000001282

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

Please return all correspondence concerning this matter to the following:

LAURIS HUA

(Name of Person)

(Name of Firm/Company)

20325 NE 15 CT

(Address)

MIAMI FL 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

LAURIS HUA

(Name of Person)

at ( 954 ) 559-6634

(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

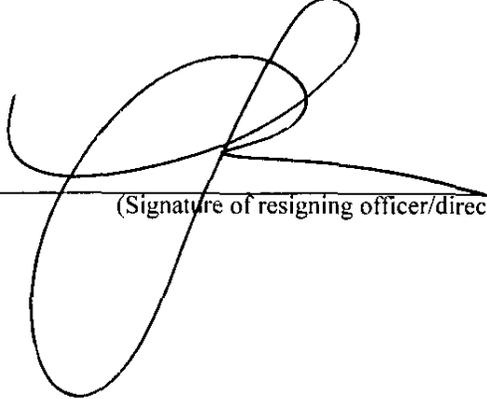
**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, LAURIS HUA, hereby resign as TREASURER  
(Title)

of Hydroblades, Inc.  
(Name of Corporation)

NO8000001282, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

  
(Signature of resigning officer/director)

FILED  
MAY 26 PM 2:02  
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