Requester's Name City/State/Zip Phone #

Office Use Only			
CORPORATION NAME(S) & DO	CUMENT NUMBER(S), (if known):		
i	<b>800003414698</b> -10/05/0001058013 ******35.00 ******35.		
(Corporation Name)	(Document #)		
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(Corporation Name)	(Document #)		
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NEW FILINGS	<u>AMENDMENTS</u>		
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Not for Profit	Resignation of R.A., Officer/Director		
Limited Liability Domestication	Change of Registered Agent		
Other	Dissolution/Withdrawal  Merger		
OTHER FILINGS	REGISTRATION/QUALIFICATION		
Annual Report	☐ Foreign		
Fictitious Name	Limited Partnership		
	Reinstatement		
	Trademark Other		
	Other		
DE031(7/07)	Examiner's Initials		



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## **OFFICER / DIRECTOR RESIGNATION**

I, JESUS FUERTES	, hereby resign as	VICE-PRESIDEN,	
		(Title) DIRECTO	R
of ARTELENIUM CORPO			····· ,
(Name o	f Corporation)		
a corporation organized under the laws of the So	tate ofFLORI	IDA ≥ <u>ω</u> Ω	
and affirm that the corporation has been notified	I in writing of the resignation	SSEE. FLO	-
	1	₽>	

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