POODOO//2285 Requester's Name Address Whet address City/State/Zip Phone

Office Use Only

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

| 1. | | (Corporation Name) | (Document #) | 100007139321 -08/15/0201045009 *****35.00 ******35.0 | .8 - : : 10 - : - |
|-----------------------------------|-------------------------------------------------------------|--------------------|--------------------------------------------------------------------|------------------------------------------------------------|----------------------|
| 2. | (Corporation Name) | | (Document #) | | <i>31</i> ₩ |
| 3. | (Corporation Name) | | (Document #) | · · | - |
| 4. | | (Corporation Name) | (Document #) | · · | - |
| | ☐ Walk in | Pick up time | | Certified Copy | |
| | Mail out | ☐ Will wait | Photocopy | ☐ Certificate of Status | |
| NEW FILINGS | | <u>s</u> S | <u>AMENDMENTS</u> | | |
| | Profit Not for Profit Limited Liability Domestication Other | | Amendment Resignation of F Change of Regis Dissolution/With Merger | hdrawal LCRETY | |
| 9 | OTHER FILINGS | | REGISTRATION/O | QUALIFICATION TO | |
| ☐ Annual Report ☐ Fictitious Name | | | Foreign Limited Partnership Reinstatement Trademark | | |

Examiner's Initials (US)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

OFFICER / DIRECTOR RESIGNATION

| I, Mityam Jimener, hereby resign as Vice Marsident |
|----------------------------------------------------------------------------------|
| of Ambientaltec USA INC. (Name of Corporation) |
| a corporation organized under the laws of the State of |
| and affirm that the corporation has been notified in writing of the resignation. |

(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