

PO 1000007777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

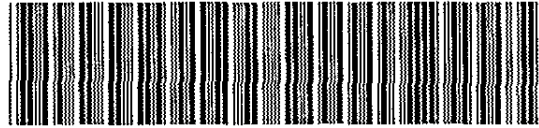
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COTI CORP.
(Name of Corporation)

DOCUMENT NUMBER: P01000007777

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

Please return all correspondence concerning this matter to the following:

Thomas Ramputi
(Name of Person)

COTI CORP. D/B/A Sonic Diagnostics
(Name of Firm/Company)

P.O. Box 6093
(Address)

Stuart, Florida 34997
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Ramputi at (772) 240-1629
(Name of Person) (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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Lisa Cosco, hereby resign as Vice President / Secretary
(Title)

of COTI CORP.
(Name of Corporation)

P01000007777, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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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