00072581 \*\*\*\*\*35.00 \*\*\*\*\*35.00 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time Certificate of Status Mail out ☐ Photocopy Will wait **NEW FILINGS AMENDMENTS P**rofit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION-OTHER FILINGS Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

169-13

CR2E031(7/97)

## OFFICER / DIRECTOR RESIGNATION

I, ELDA E	E. MAGILEWSKI	, hereb	y resign asSECRET <i>I</i> (Title)	ARY/TREASURER	
of		ION CORPORATION,	INC.		<b>5</b> .
a corporation	n organized under the l	laws of the State of _	FLORIDA		<del></del>
and affirm th	nat the corporation has	been notified in writin	g of the resignation.		
•		(Signature of resigning	officer/director)		
AUGUST 29,	, 2002			02 SEP -6 AM 10: 38 SECRETARY OF STATE TALLAHASSEE, FLORID	

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