

PO6000016048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

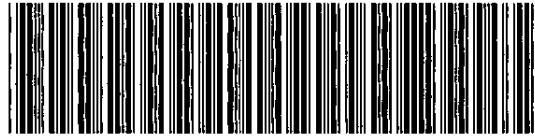
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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400121662584

Resignation  
of officer

04/04/08--01037--005 \*\*35.00

FILED  
2008 APR -4 AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AKR  
4/9/08

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ICU Surveillance Systems Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000016048

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

Please return all correspondence concerning this matter to the following:

Armando Mendieta  
(Name of Person)

ICU Surveillance Systems Inc.  
(Name of Firm/Company)

181 NW 97th Ave #212  
(Address)

Miami FL 33172  
(City/State and Zip Code)

For further information concerning this matter, please call:

Armando Mendieta at ( 786 ) 355 5077  
(Name of Person) (Area Code & Daytime Telephone Number)

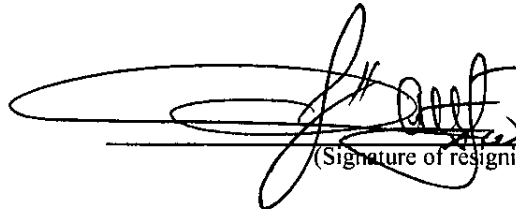
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

☐ **Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, F 3 314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Armando Mendieta, hereby resign as Vice President  
of ICU Surveillance Systems Inc.  
(Name of Corporation)  
P06000016048, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

  
(Signature of resigning officer/director) Armando Mendieta

**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