

906000018683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

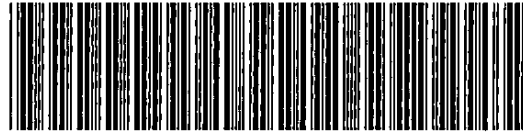
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700081670937

11/20/06--01057--024 **35.00

FILED
06 NOV 20 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-20-06 04
07R2

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LYMAT INVESTMENTCORP, INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000018683

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

Please return all correspondence concerning this matter to the following:

MATHIAS BRUEFACH

(Name of Person)

LYMAT INVESTMENT CORP, INC.

(Name of Firm/Company)

2551 SQUAW CREEK

(Address)

CLERMONT, FL 34711

(City/State and Zip Code)

For further information concerning this matter, please call:

MATT BRUEFACH

(Name of Person)

at (407) 260-1252

(Area Code & Daytime Telephone Number)

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

2-2

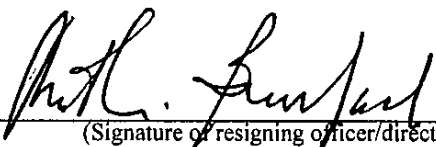
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MATHIAS BRUEFACH, hereby resign as PRESIDENT
(Title)

of LYMAT INVESTMENT CORP., INC.
(Name of Corporation)

P06000018683, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
06 NOV 20 AM 9:16
SECRETARY OF STATE
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

RECEIVED
NOV 03 2006
CIU REV/ADM