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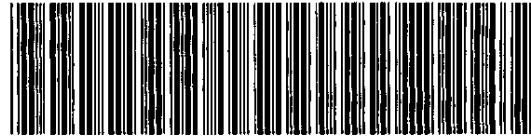
(Business Entity Name)

(Document Number)

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2010 AUG -5 PM 4:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

*g.9.10*

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Michelle Dukes, hereby resign as VP  
(Title)

of Icon Biomedical Inc.  
(Name of Corporation)

PO000023184, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Michelle Dukes  
(Signature of resigning officer/director)

**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

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Icon Biomedical Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000023184

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

Please return all correspondence concerning this matter to the following:

FABIO Rooi  
(Name of Person)

Icon Biomedical Inc.  
(Name of Firm/Company)

3475 Golden Gate Blvd. W.  
(Address)

Naples, FL 34120  
(City/State and Zip Code)

For further information concerning this matter, please call:

FABIO Rooi at (239) 643-3689  
(Name of Person) (Area Code & Daytime Telephone Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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