P11000092086

(Requestor's Name)	
(Address)		
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PICK-UP	WAIT MAIL	
	(Business Entity Name)	
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Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MDX TRIM INC (Name of Corporation)	
DOCUMENT NUMBER: P1100009086	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for t	filing
Please return all correspondence concerning this matter to the following:	
Matias I Iglesias	
(Name of Person)	
MDX TRIM INC	
(Name of Firm/Company)	
1520 OAK LEAF LN	
(Address)	
KISSIMMEE FL 34744	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
MATIAS IGLESIAS at (407) 280-0595 (Area Code & Daytime Telephone Number 1) (Area Code & Daytime Telephone Number 1)	
(Name of Person) (Area Code & Daytime Telephone Numl	ber)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.	
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301	`\

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FRANCO I PONCE	, hereby resign as Secretary VicePrecident
	(Title)
of MDX TRIM INC	· · · · · · · · · · · · · · · · · · ·
(Name of Corp	oration)
P11000092086 (Document Number, if known)	rporation organized under the laws of the State of
Florida	志
	FIL Aug 29
franco Pon	S S S S S S S S S S S S S S S S S S S
(Signatur	e 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