

P12 000093650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2016 FEB 24 PM 12:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 26 2016  
C. CARROTHERS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** **BIOVIS MEDICAL MARKETING INC**  
(Name of Corporation)

**DOCUMENT NUMBER:** **P12000093650**

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

Please return all correspondence concerning this matter to the following:

**JOHN BAYLISS**

(Name of Person)

(Name of Firm/Company)

**49 N FEDERAL HWY #350**

(Address)

**POMPANO BEACH, FL 33062**

(City/State and Zip Code)

For further information concerning this matter, please call:

**DINA LUI**

(Name of Person)

at ( **954** ) **449-6018**

(Area Code & Daytime Telephone Number)

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

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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

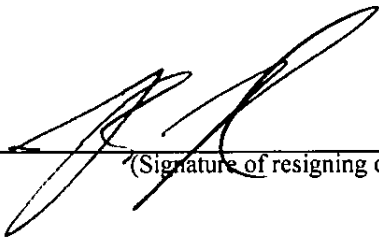
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JOHN BAYLISS, hereby resign as VP  
(Title)

of BIOVIS MEDICAL MARKETING INC,  
(Name of Corporation)

P12000093650, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

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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

Should have never been principal of this company.  
Please remove ASAP, backdate to inception if possible.