## P130000 41670

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
. (Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

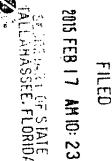
Office Use Only



600269144516

resignation of oppioes

02/17/15--01012---007 \*\*35.00



2/18/15

## TRANSMITTAL LETTER

SUBJECT: Technomedical Group Inc. (Name of Corporation)
DOCUMENT NUMBER: 713000041670
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Yanni Paz (Name of Person)
Technomedical Group Inc. (Name of Firm/Company)
717 Shotaun Rd.
Sun ruse fr 33326 (City/State and Zip Code)
For further information concerning this matter, please call:
To zee Cardenasat (954) 544 0076 (Name of Person) (Area Code & Daytime Telephone Number)

TO:

**Amendment Section** Division of Corporations

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

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

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2015 FEB | 7 AM 10: 23

	SECRETARY OF STATE TALLAHASSEE, FLORIDA
I, Ana Jacquelius GONZOLZ, hereby resign as	Vice President
	(Title)
of Technomedical Gray Inc. (Name of Corporation)	
P13000041670, a corporation organized un(Document Number, if known)	der the laws of the State of
Florida.	

(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