

P130000073008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: **PRODIN USA CORP**  
(Name of Corporation)

DOCUMENT NUMBER: **P13000073008**

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

Please return all correspondence concerning this matter to the following:

**NELSON ODELLA**

(Name of Person)

**PRODIN USA CORP**

(Name of Firm/Company)

**6187 NW 167 ST H40**

(Address)

**MIAMI FLORIDA 33015**

(City/State and Zip Code)

For further information concerning this matter, please call:

**NELSON**

(Name of Person)

at **(305) 4390246**

(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

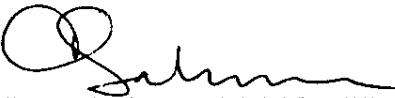
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, CRYSTAL SALOMON, hereby resign as SECRETARY  
(Title)

of PRODIN USA CORP  
(Name of Corporation)

P13000073008, a corporation organized under the laws of the State of  
(Document Number, if known)

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

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