

# PI3000100659

Florida Department of State  
Division of Corporations  
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To:

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Account Number : FCA000000001  
Phone : (305)854-6000  
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
IDEAL PAIN SOLUTIONS INC.**

Certificate of Status	0
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C. CARROTHERS

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**NOTICE OF RESIGNATION**

**OF**

**OFFICER AND DIRECTOR**

**FROM**

**IDEAL PAIN SOLUTIONS INC.**

Pursuant to Florida Statutes, Neil Brown adopts and files with the Secretary of State of Florida the following Notice of Resignation from IDEAL PAIN SOLUTIONS INC., a Florida corporation (hereinafter the "Corporation") and states as follows:

- FIRST:** That Neil Brown was the Director and President of the Corporation.
- SECOND:** That Neil Brown tendered to the Corporation his resignation as Director and President of the Corporation, copies of which are attached herewith.
- THIRD:** That Neil Brown wishes to have his name removed as Director and President of the Corporation currently on file with the Secretary of State of Florida.

Signed this 6 September 2016.

  
Neil Brown, Resignee

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**SPIEGEL & UTRERA, P.A.**

**LAWYERS**

[www.amerilawyer.com](http://www.amerilawyer.com)

1840 CORAL WAY 4TH FLOOR MIAMI, FL 33245 - (305) 854-6000 - (800) 603-3900 - FACSIMILE (305) 857-3700  
MAILING ADDRESS - POST OFFICE BOX 450605, MIAMI, FL 33245-0605

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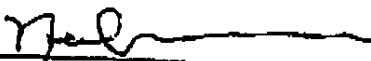
**RESIGNATION OF DIRECTOR AND PRESIDENT**

To: IDEAL PAIN SOLUTIONS INC.

The undersigned does hereby tender resignation as Director and President of the above named Corporation, such resignation to take effect immediately.

Date: 6 September 2016

  
\_\_\_\_\_  
Witness

  
\_\_\_\_\_  
Neil Brown

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