P16000020964

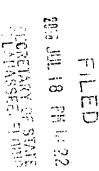
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TRANSMITTAL LETTER

Amendment Section Division of Corporations Personal Digital Health, Inc. SUBJECT: (Name of Corporation) P16000020964 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gary Walter (Name of Person) Personal Digital Health, Inc. (Name of Firm/Company) 480 Hibiscus St. #439 (Address) West Palm Beach, FL 33401 (City/State and Zip Code) For further information concerning this matter, please call: Gary Walter (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations 2661 Executive Center Circle P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Gary Walter	Director	
I,	, hereby resign as(Title)	
Personal Digital Health, Inc.		
of(Nam	e of Corporation)	
P16000020964 (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida	<u> </u>	
<u> </u>	ley RMM (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