

PI7000079124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

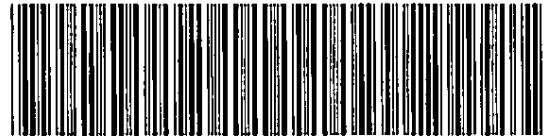
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DIVISION OF CORPORATIONS  
18 MAY 21 PM 4:53

OLD Resignation

MAY 23 2018

D CUSHING

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: FOLIUM HEALTH INC  
(Name of Corporation)

DOCUMENT NUMBER: D 17 0000 79124

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

Please return all correspondence concerning this matter to the following:

LUIS F. YCAZA  
(Name of Person)

FOLIUM HEALTH, INC  
(Name of Firm/Company)

17900 GOLF BOULEVARD 2D FL  
(Address)

REDINGTON SPRINGS FL 33708  
(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS F. YCAZA at (813) 4518646  
(Name of Person) (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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 MAY 21 PM 4:53

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Viveka Ycaza, hereby resign as President  
(Title)

of Folium Health Inc.  
(Name of Corporation)

017000079124, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

Viveka Ycaza  
(Signature of resigning officer/director)

18 MAY 21 PM 4:59

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CLERK OF STATE  
DIVISION OF CORPORATIONS

**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