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Requester's Name _Endoscopy Technology Inc. 5190 NW 167 Street, Suite 202 Miami, Fl. 33014 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 500006553455--9 -07/22/02--01063--020 (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy ☐ Photocopy ☐ Mail out ☐ Will wait Certificate of Status NEW FILINGS **AMENDMENTS**

☐ Profit Amendment Resignation of R.A., Officer/Director-■ Not for Profit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/OUALIFICATION

Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

OFFICER / DIRECTOR RESIGNATION

I,	Gustavo Ignacio Mazzolino	, hereby resign as	President	
		.,,	(Title)	
of	ENDOSCOPY TECHNOLOGY, INC.			
	(Name of Corporation	on)		
a cor	poration organized under the laws of the Stat	e ofFlorida		
and a	ffirm that the corporation has been notified i	n writing of the resig	gnation.	
	Johns (esigning officer/director		
	(Signature of F	esigning officer/director	·)	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314