001060 592 93 nd Ave. Naples, FL 33963 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time Mail out ☐ Will wait Photocopy Certificate of Status "NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A. Officer/Director 800002290068--4 -09/11/97--01013--015 *****35.00 *****35.80 Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Other

Examiner's Initials

De 9/9

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

SECRETARY OF STATES

| I, KOSE M. DWYEE, hereby resign as Officer DIRECTOR |
|---|
| of DR. LimiTED, INC. (Name of Corporation) |
| a corporation organized under the laws of the State of Flori DR |

(Signature of resigning officer/director)

and affirm that the corporation has been notified in writing of the resignation.

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314