

N 20 000 000 096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

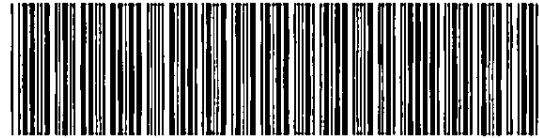
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GLOBAL COCREATION LAB, INC.

(Name of Corporation)

DOCUMENT NUMBER: N20000000096

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

LOURDES CASTILLO

(Name of Person)

DE LA PEÑA GROUP, P.A.

(Name of Firm/Company)

600 BRICKELL AVENUE, STE 1750

(Address)

MIAMI, FLORIDA 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

LEONCIO E. DE LA PEÑA

(Name of Person)

at (305) 377-0909

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LOURDES CASTILLO, hereby resign as DIRECTOR
(Title)

of GLOBAL COCREATION LAB, INC.
(Name of Corporation)

N20000000096, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(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

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