752423

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
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TRANSMITTAL LETTER

SUBJECT:	Name of Corporation)	
DOCUMENT NUMBER: 752423		
The enclosed Officer/Director Resignation for	or a Corporation and fee are submitted for f	
Please return all correspondence concerning	this matter to the following:	
CYPRESS RUDLOE		
(Name of Person)		
GULF SPECIMEN MARIE LABORATORY, INC.		
(Name of Firm/Company)		
PO BOX 237		
(Address)		
PANACEA, FL 32346		
(City/State and Zip Code)		
For further information concerning this matte	r, please call:	
CYPRESS RUDLOE	850 984-5297	
(Name of Person)	at (S50 984-5297) (Area Code & Daytime Telephone Numb	
Enclosed is a check for \$35.00 made payable		
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Amendment Section Division of Corporations

TO:

P.O. Box 6327

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ANDREA CARTER I,	DIRECTOR, hereby resign as
	(Title)
GULF SPECIMNE MARINE LABORA	
(Nam	ne of Corporation)
752423 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	
	<u></u> -

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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SECRETAKY OF STATE