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(Requestor's Name)		
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PICK-UP WAIT MAIL		
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Certified Copies Certificates of Status		
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Chariet Instructions to Filing Officer		
Special Instructions to Filing Officer:		
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Withdrawal

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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

FILED

ADR 5/12/09

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: <u>Gamina</u> <u>Laboratories</u> (Name of	(Corporation), Inc.
DOCUMENT NUMBER:F06 00003	891
The enclosed withdrawal application and fee are sub	mitted for filing.
Please return all correspondence concerning this matter to the following:	
James R. Maida (Name of Person)	
(Name of Person)	
Gamina Laboratories International Inc.	
Gaming Laboratories International, Inc. (Firm/Company)	
855 Parkway Avenue (Address)	
(Address)	
Ewing Nゴ ON18 (City/State and Zip code)	
(City/State and Zip code)	
For further information concerning this matter, please	
James Maida at (732) 942 - 3999 1104
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section
	i interioritation poeticii

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Gaming Laboratories International, Inc. (Name of Corporation)
F060000389/ (Document Number of Corporation (if known)
New Jersey (Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Borida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
855 Porkwy Avenue (Mailing Address)
Ewing NJ 08618 (City/State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
Tomes R. Maida Resident (Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35