F08000004303

Waltors Klouper (Requestor's Name)			
(Requestor's Name) (Address)			
III Eighth The.			
Mon York W 10011 (City/State/Zip/Phone #)			
PICK-UP WAIT M	AIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status	 		
Special Instructions to Filing Officer:			

Office Use Only



700213939167

11/08/11--01030--001 **175.00

R.A. Res.

TBrown 11-9-11

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 6	7.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
. Torrau Sanatos, and anaersignes,	(Name of Registered Agent)	
	RELIANT LAB DIAGNOSTICS, INC. (D)	E. DOM)
hereby resigns as Registered Agent for	(Name of Corporation)	•
F08000004303	(**************************************	
(Document Number, if known)	<u> </u>	
A copy of this resignation was mailed to	o the above listed corporation at its last k	nown address.
this statement is filed.	discontinued on the 31st day after the day	
If signing on behalf of an entity:	gradure of Resigning Agent)	2011 NOV -8 SECRETAR TALLAHAS
C T CORPORAT	TION SYSTEM - THERESA ALFIERI	SEE.
(Typed or Printed Name)	MII: 28 OF STATE EFFLORID
AS	SISTANT SECRETARY	28 RID
	(Capacity)	_

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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