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TRANSMITTAL LETTER

SUBJECT: CAMRON INC. (Name of Corporation) DOCUMENT NUMBER:_ The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **EDWARD C BURNS** (Name of Person) CAMRON INC. (Name of Firm/Company) 13482 SW 131 ST (Address) MIAMI, FL. 33186 (City/State and Zip Code) For further information concerning this matter, please call: JOAN RAFTER 0113) 53469552771 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section
Division of Corporations
409 E. Gaines Street Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32399

Amendment Section Division of Corporations

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, EDWARD C. BURNS	, hereby resign as_	PRESIDENT	PASSELL A
of CAMPRON,INC.		((Title)
	of Corporation)		
(Document Number, if known)	a corporation organized un	der the laws of t	he State of
FLORIDA	•		
, ($\sim Q$		

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