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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: The English Lab, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO3000026428.
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Frona Mowatt. (Name of Person)
The English Lab The.  (Name of Firm/Company)
5460 N. State Ra 7 (Address)
F4. City/State and Zip Code) 33317
For further information concerning this matter, please call:
Fore Mowatt at (954) 970-3755 (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

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TO:

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Froma	Monath	, hereby resign as_	Preside	itle)	
of Th	e English	Cab. Inc.		,	
P 0 3 0 0 0	O 26428 , s Number, if known)	a corporation organized un	der the laws of th	e State F	ا پان
Flor	ide			5555	= M
	6			AM 9:57 OF STATE	
	Jua_(Sigr	Months ature of resigning officer direct	tor)	***************************************	

## 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