## P04000095072

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## **COVER LETTER**

Division of Corporations			
SUBJECT: PALMETTO FERTILITY LABORATORY, INC	<u>.</u>		
(Name of Corporation)			
DOCUMENT NUMBER: P04000095072	_		
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	or filing.		
Please return all correspondence concerning this matter to the following:			
Charles Gamble			
(Name of Person)			
K&L Gates LLP			
(Name of Firm/Company)	₹s	끖	
200 S. Biscayne Blvd., Suite 3900	LAH	13 NOV	
(Address)	ASS	8	-
Miami, FL 33131		PM	T
(City/State and Zip Code)		T: 3	*****
For further information concerning this matter, please call:	型に	$\frac{\omega}{2}$	
Charles Gamble at (305 ) 539-3307			
(Name of Person) (Area Code & Daytime Telephone Number	<u>7</u>		

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

ursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
lorida Statutes, the undersigned, William J. Spratt, Jr.
(Name of Registered Agent)
ereby resigns as Registered Agent for PALMETTO FERTILITY LABORATORY, INC.
(Name of Corporation)
P04000095072
(Document Number, if known)
copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which his statement is filed.
Wyrom -
(Signature of Resigning Agent)  F signing on behalf of an entity:  (Signature of Resigning Agent)  (Signature of Resigning Agent)  (Signature of Resigning Agent)  (Signature of Resigning Agent)
(Typed or Printed Name)
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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