## P04000107775

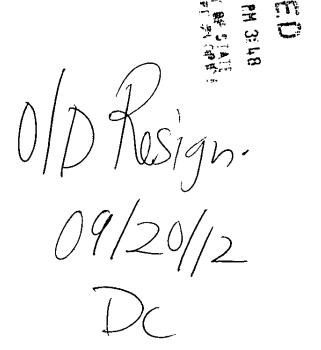
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

Division of Corporations
SUBJECT: BLUE DOLPHIN CASINO CLUB 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:
CLAIRE ABELMAN (Name of Person)
BUE DOLPHIN CASINO CLUB INC (Name of Firm/Company)
(Name of Firm/Company)
SYI MONACO L DE (Address)
DELRAY BEACH, FLORIDA. 33446 (City/State and Zip Code)
For further information concerning this matter, please call:
CLAIRE ADELMAN at (561) 637 - 3922 (Name of Person) at (561) 637 - 3922 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, STUART MICHAEL COMM, hereby resign as PRESIG	O CNT (Title)
of BLUE DOLPHIN CASIND CLUB INC. (Name of Corporation)	
, a corporation organized under the laws of (Document Number, if known)	of the State of
FLORIDA.	
•	
Signature of resigning officer/director)	12 881 17 11

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

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