

PO60000017709

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(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gavin Anthony Inc
(Name of Corporation)

DOCUMENT NUMBER: P06000017709

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda Lepore

(Name of Person)

Gavin Anthony Inc

(Name of Firm/Company)

2202 SE 8th Avenue

(Address)

Cape Coral, FL 33990

(City/State and Zip Code)

For further information concerning this matter, please call:

Linda Lepore

(Name of Person)

at (239) 540-1104

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

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

Mailing Address:

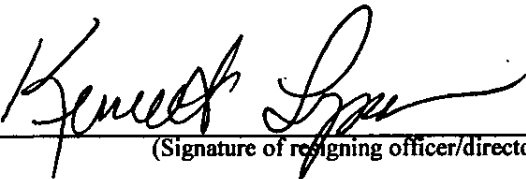
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Kenneth Lepore, hereby resign as Director
(Title)

of Gavin Anthony Inc
(Name of Corporation)

P06000017709, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILED
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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