

PI0000065935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

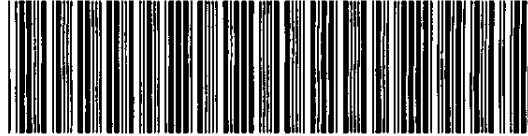
(Business Entity Name)

(Document Number)

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900275436459

Resignation  
of officer

07/28/15--01015--006 \*\*35.00

FILED  
2015 JUL 28 PM 3:11  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

JUL 29 2015  
A RAMSEY

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THE COMPULAB CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000065935

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

Please return all correspondence concerning this matter to the following:

**FERNANDO PEREZ**

(Name of Person)

**THE COMPULAB CORP**

(Name of Firm/Company)

**5484 NW 90th Ave**

(Address)

**Sunrise, FL 33351**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Fernando Perez** at ( **954** ) **937-9727**  
(Name of Person) (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

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED

2015 JUL 28 PM 3:11

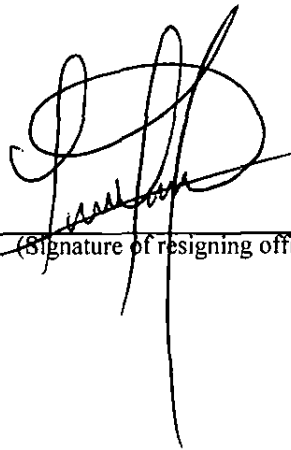
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, FERNANDO PEREZ, hereby resign as VP  
(Title)

of THECOMPULAB CORP  
(Name of Corporation)

P10000065935, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

**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