F0400004940

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
•	•	•
Фс	cument Number)	
(··/	
Certified Copies	Certificates	of Status
Cerunea Copies	Oerunoates	- Ci Ciaus
·		
Special Instructions to	Filing Officer:	1
		}
		<u></u>
		l
		ļ
		İ
		1
<u></u>		

Office Use Only



000057589410

07/20/05--01023--011 **437.50

resignation

FILED

05 JUL 20 PM 2:53

SECRETARY OF STATE ALLAHASSEE, FLORIDA



. CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Valor Con	rputerized Syptem	<u>s</u>
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
•		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
•		Annual Report / Reinstatement
•	··· .	Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
		Vehicle Search
	<u> </u>	Driving Record
Requested by:	1,7 7/12	UCC 1 or 3 File
Name	Date Time	UCC 11 Search
1141110	Zuto Inno	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

DESIGNATION OF DECISTEDED ACENT	FILED
RESIGNATION OF REGISTERED AGENTS FOR A CORPORATION	JUL 20 PM 2:53
	RETARY OF STAJE
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 6	17.15095 FLURIDA
Florida Statutes, the undersigned, Capital Connaction (Name of Registered Agent)	the
hereby resigns as Registered Agent for Valor Computerized (Name of Corporation)	Systems, Inc
FOHOOOOH940 (Document Number, if known)	

A 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 this statement is filed.

Relani White
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

Registered Agent Coordinator (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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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