Division of Corporations Electronic Filing Cover Sheet

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(((H100002744953)))



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To:

Division of Corporations

Fax Number

: (850) 617-6380

From:

Account Name

: INCORPORATING SERVICES FL

Account Number : I20050000052

Phone

: (302)531-0855

Fax Number

: (850)656-7953

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT RESIGNATION FIRE PROTECTION SERVICES INC.

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12/22/2010

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COVER LETTER

TU;	Amendment Section Division of Corporations			•
SUBJ	ECT: FIRE PROTECTION SERVICES			
	(Name	e of	Corporation	on)
DOC	UMENT NUMBER: F06000007587			
The er	nclosed Resignation of Registered Agent f	or a	a Corpora	tion and fee are submitted for filing.
Please	return all correspondence concerning this	s m	atter to th	e following:
TŲN	ISHA SCOTT			
	(Name of Person)			
INC	ORPORATING SERVICES, LTD.			
	(Name of Firm/Company)			
3500	S. DUPONT HIGHWAY			
	(Address)			
DOV	ER, DE 19901		•	
	(City/State and Zip Code)			
For fu	ther information concerning this matter, p	plea	ase call:	
TUNI	SHA SCOTT at (1	302	531-0855
	(Name of Person)	(A	Area Code	& Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections	607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	NCORPORATING SERVICES, LTD.	
	(Name of Registered Agent)	
hereby resigns as Registered Agent fo	FIRE PROTECTION SERVICES INC.	
	(Name of Corporation)	
F06000007587		
(Document Number, if known)		
A copy of this resignation was mailed	to the above listed corporation at its last known address.	
this statement is filed.	Lea Lia Signature of Resigning Agent)	
If signing on behalf of an entity:		
Candice B. Swe	(Typed or Printed Name)	C)
<u></u>	(Typed or Printed Name)	Marines.
Assistant Secret	tary	
	(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