

G92156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300024175553

10/31/03--01091--001 **35.00

03 OCT 31 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

EIA Reagin
Jm
11/5/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNCOAST SAFE & LOCK, INC

DOCUMENT NUMBER: G92156

The enclosed *Articles of Revocation of Dissolution* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN W. Himer, Sr.
(Name of Person)

SUNCOAST SAFE & LOCK
(Name of Firm/Company)

3422 EAST 7th AVENUE
(Address)

TAMPA FL 33605
(City/State/ and Zip Code)

For further information concerning this matter, please call:

Brian Himer at (813) 598-0941
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

FILED
03 OCT 31 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Glenn W. Himert
(Name of Registered Agent)
hereby resigns as Registered Agent for SUNCOAST SAFE + LOCK, INC
(Name of Corporation)

G92156
(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.

Brian Himert for Glenn Himert
(Signature of Resigning Agent) *deceased -
death cert
attached*

If signing on behalf of an entity:

Brian W. Himert
(Typed or Printed Name)

Trustee for Glenn W. Himert Living Trust
(Capacity) *DATE 2/19/1999*

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withdrawn corporation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