N47924

(Requestor's Name)					
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Na	me)			
(Do	cument Number)			
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Office Use Only



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RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 60	7.0502(2), 617.050	02(2), 607.1509, o	r 617.1509.	,	
Florida Statutes, the undersigned,					
	(Name	of registered agent)			
hereby resigns as Registered Agent for	Sweetwater Cre		Associati	Iر on	nc
	Document #N479	ne of corporation) 24			
A copy of this resignation was mailed to	the above listed co	orporation at its las	t known add	lress.	
The agency is terminated and the office this statement is filed.	discontinued on the	e 31st day after the	date on whi	ich	
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				2	
	Deli-		₩ %.	ΑP	
(Sig	nature of resigning age	nt)		APR-9	ATTENDED.
If signing on behalf of an entity:				9 ₽	m
			SE		D
	Y MANAGEMENT II			l: 02	
(T	yped or Printed Name)				
	PRESIDENT				
	(Capacity)				

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314