P94000081147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/8/05
LLC's.

DAVID J. SCHOTTENFELD, P.A.

Attorney at Law

7520 Northwest 5th Street
Suite 203
Plantation, Florida 33317

Telephone (954) 316-5033
Fax (954) 316-5037

November 1, 2005

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

Re: Segal, Inc.
Document # P94000081147

Gentlemen:

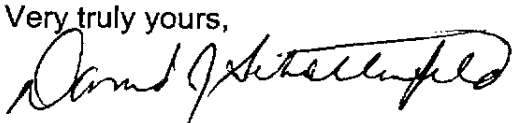
Enclosed herein find Resignation of Registered Agent and Statement of Change of Registered Agent with respect to the above referenced entity, together with check in the amount of $122.50 representing your fees for these documents.

Kindly forward the appropriate correspondence/documents to the undersigned at your earliest opportunity.

In the event you require any additional information, please do not hesitate to contact my office.

Thank you in advance for your courtesy and prompt response.

Very truly yours,



DAVID J. SCHOTTENFELD

DJS/mib
Encl.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SEGAL, INC.
(Name of Corporation)

DOCUMENT NUMBER: P94000081147

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Segal, Inc.
(Name of Person)
c/o David J. Schottenfeld, P.A.
(Name of Firm/Company)
7520 NW 5 Street # 203
(Address)
Plantation, FL 33317
(City/State and Zip Code)

For further information concerning this matter, please call:

David J. Schottenfeld, Esq at (954) 316-5033
(Name of Person) (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of State for $87.50 for an active corporation or $35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, DEREK SEGAL (Name of Registered Agent)

hereby resigns as Registered Agent for SEGAL, INC. (Name of Corporation),

P94000081147 (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.

(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(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