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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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ACHA KAKESIGA

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	(Name of Corporation)
DOCU	UMENT NUMBER: 400831
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	(Name of Person)
/	(Name of Firm/Company)  (Name of Firm/Company)  (Address)
_//	M/Mm/ 53/3/ (City/State and Zip Code)
For fu	rther information concerning this matter, please call:
$\mathcal{I}$	. GORDON at (305 8586700)
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

rsuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
orida Statutes, the undersigned, OECILIA ZURITA (Name of Registered Agent)	
ereby resigns as Registered Agent for ENGECOUZ ENGINEERING, CO	K
(Document Number, if known)	
copy of this resignation was mailed to the above listed corporation at its last known address.	
ne agency is terminated and the office discontinued on the 31st day after the date on which is statement is filed.	
(Signature of Resigning Agent) signing on behalf of an entity:	
CECLIA ZULIA (Typed or Printed Name)  TALLAHASSEE	
(Capacity)  (Capacity)  (Capacity)  (Capacity)  (Capacity)	j

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withdrawn corporation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