## 729888

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		
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Office Use Only



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111 Eighth Avenue

212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

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October 8, 2010

PLEASE SEE ATTACHED LIST. RE:

Department of State Division of Corporations Clifton Building 261 Executive Center Circle Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is 1 check in the amount 175.00 to cover the required filing fec.

· 4277 1. .

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Thereca Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

MARGATE MOOSE LODGE NO.2201, LOYAL ORDER OF MOOSE. (FL. DOM.)

PERRY LODGE NO. 2353, LOYAL ORDER OF MOOSE, INC. (FL. DOM.)

POINCIANA LODGE NO.2409, LOYAL ORDER OF MOOSE. (FL. DOM.)

SOUTH MIAMI LODGE NO. 2229 LOYAL ORDER OF MOOSE, INC. (FL. DOM.)

ST. AUGUSTINE LODGE NO. 1017, LOYAL ORDER OF MOOSE, INC. (FL. DOM.)

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	507.0502(2), 617.0502(2), 607.1509, or 617.150	09,	
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	MARGATE MOOSE LODGE NO.2201, LOYAI ORDER OF MOOSE. (FL. DOM.) (Name of Corporation)	<u> </u>	
729888			
(Document Number, if known)	<del></del>		
A copy of this resignation was mailed	to the above listed corporation at its last known	address.	
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on	which	
2hC			
(S	ignature of Resigning Agent)		
If signing on behalf of an entity:	0	~~ <del>'</del>	
C T CORPORATION SYSTEM - THERESA ALFIERI			
	(Typed or Printed Name)	- T	
AS	SSISTANT SECRETARY	Max	
	177 . 18	70	
	(Capacity)	7	
		₫m	

## 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