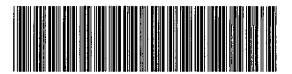
## 0/0575

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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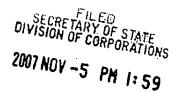
## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations
SUBJ	ECT: Scotty's, Inc.
	(Name of Corporation)
DOCU	UMENT NUMBER: 016575
The en	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Tam	my J. Buchan
	(Name of Person)
Broa	d and Cassel
	(Name of Firm/Company)
390	North Orange Avenue, Suite 1400
	(Address)
Orlai	ndo, Florida 32801
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Tamr	my J. Buchan at ( 407 ) 839-4244
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Fursuant to the provisions of sections 607.0302(2), 617.0302(2), 607.1309, 61 617.1309,
Florida Statutes, the undersigned, B&C Corporate Services of Central Florida, Inc.
(Name of Registered Agent)
hereby resigns as Registered Agent for Scotty's, Inc.
(Name of Corporation)
016575
(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:
Janice C. Myers
(Typed or Printed Name)
Vice President
(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