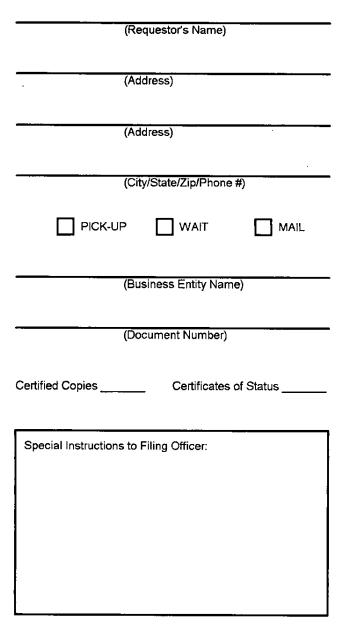
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SECRETARY OF STATE
TAIL AHASSEE FLORID

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Shook Steel, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER:
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:
Jos	seph S. Shook
	(Name of Person)
Lav	w Office of Joseph S. Shook
	(Name of Firm/Company)
75	Valencia Avenue, 4th Floor
	(Address)
Co	ral Gables, FL 33134
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Jos	Seph S. Shook at (305) 446-4177 (Name of Person) (Area Code & Daytime Telephone Number)
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the	provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statutes	, the undersigned, Joseph S. Shook	
	(Name of Registered Agent)	
hereby resigns a	as Registered Agent for Shook Steel, Inc.	
nereey reeigne c	(Name of Corporation)	-
(Documer	nt Number, if known)	
A copy of this r	esignation was mailed to the above listed corporation at its last know	wn address.
The agency is to this statement is	erminated and the office discontinued on the 31st day after the date s filed.	on which
	(Signature of Resigning Agent)	
If signing on be	half of an entity:	₩. →
	Shook Steel, Inc.	6 FEB
	(Typed or Printed Name)	35 J
	Registered Agent and 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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