707929

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

Office Use Only



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10/14/10--01012--009 **140.00

OCT 1 4 2010

EXAMINER



111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

October 8, 2010

RE:	APALACHEE LODGE NO. 2603, LOYAL ORDER	
	OF MOOSE, INC.	(FL. DOM.)
	FLORAL CITY LODGE NO. 2506, LOYAL OF	
	MOOSE, INC.	(FL. DOM.)
	GULF BEACH MOOSE LODGE NO 2123,	
	LOYAL ORDER OF MOOSE, INC.	(FL. DOM.)
	LAKELAND LODGE NO. 945, LOYAL ORDER	•
	OF MOOSE, INC.	(FL. DOM.)

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 check in the amount of \$140.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure

≊

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or	r 617.1 5 09,
Florida Statutes, the undersigned,	C T CORPORATION SYSTE	EM
, c , 	(Name of Registered Agent)	
hereby resigns as Registered Agent for	ORDER OF MOOSE INC. (FL. DOM. (Name of Corporation)	2123, LOYAL },
707929		
(Document Number, if known)	_	
A copy of this resignation was mailed t	o the above listed corporation at its las	st known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the	date on which
l l l l l l l l l l l l l l l l l l l	gef.	
(Si	gnature of Resigning Agent)	7 V SE
If signing on behalf of an entity:		O OCT 14
		7 02 02 02 02 02 02 02 02 02 02 02 02 02
	(Typed or Printed Name)	PH 3:27
AS	SISTANT SECRETARY	ATION 27
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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