(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT .	MAIL
, (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

SUBJECT: Tabernacle Church	(Name of Company	tion)
	(Name of Corpora	tion)
DOCUMENT NUMBER: 717	884	
The enclosed Resignation of Regi	stered Agent for a Corpor	ration and fee are submitted for filing
Please return all correspondence of	oncerning this matter to	the following:
Michael D Smith		
(Name of Pe	rson)	_
Tabernacle Church of Melbou	irne, Inc	
(Name of Firm/C	Company)	_
1619 Ferndale Ave		
(Address	s) .	_
Melbourne, Fl 32935		
(City/State and Z	Zip Code)	
For further information concerning	g this matter, please call:	
Darlene Dycus	at (321	259-2024 le & Daytime Telephone Number)
(Name of Person)		O D. Alma Talankana Manakan

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, Michael Smith
(Name of Registered Agent) Tabernacle Church of Melbourne, INC. (Name of Corporation)
717884
(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:
(Typed or Printed Name) TALCAHAY AHAS
CAPACITY) (Capacity) (Capacity)
Fee for filing this document:

withdrawn corporation
.

\$35.00 - Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

\$87.50 - Active corporation