## 832402

(Re	questor's Name)	
(15		
(Ad	dress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only

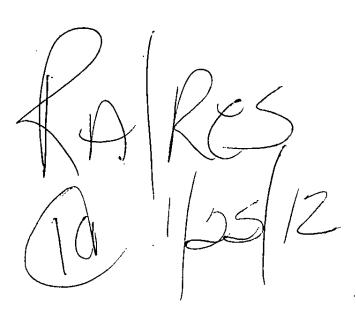


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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS





## **CT** Corporation

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

January 19, 2012

RE: FFP ADVISORY SERVICES INC. (MO.DOM.)
GAYLORDS NATIONAL CORPORATION. (NY.DOM,)
THE HOSPITAL TRUST LEASING CORPORATION. (RI.DOM.)
LANDFORM ENGINEERING COMPANY. (MN.DOM.)
NOODLE KIDOOLE, INC. (DE.DOM.)

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  $\underline{1}$  check in the amount of  $\underline{\$ 175.00}$  to cover the required filing fee.

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

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607	.0502(2), 617.0502(2), 607.1509, or 617.150	)9,		
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM			
	(Name of Registered Agent)			
THE HOSPITAL TRUST LEASING CORPORATION (RL DOM)				
Thereby resigns as registered regent for Th	(Name of Corporation)		<b></b> ,	
832402				
(Document Number, if known)	•			
A copy of this resignation was mailed to t	he above listed corporation at its last known	addre	ess.	
this statement is filed.	iscontinued on the 31st day after the date on a	which	1	
If signing on behalf of an entity:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
C T CORPORATIO	ON SYSTEM - THERESA ALFIERI	•		
(Ту	ped or Printed Name)			
ASSIS	STANT SECRETARY	12	SIAIG	
	(Capacity)	JAN 25	FIL CRETARY IDN OF C	
\$87.50 - Active	this document: e corporation nistratively dissolved/voluntarily dissolved/	PH 3: 54	COF STATE ORPORATIONS	

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

withdrawn corporation