Sequester's Name	ee e G
Address  City/Ve/Zip  Ine#	2376
COPPORATION NAME(S) & DOCUM	Office Use Only
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):
1. Melbouce I (Corporation Name)	Mechational (Document#)
2. (Corporation Name)	(Document #)
3(Corporation Name)	400084451042 -10/18/0201030026 *****87.50 *****87.50
4(Corporation Name)	(Document #)
Walk in Pick up time Wall out Will wait	Certified Copy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other  CONTROL  TOTAL  ALLON  ALLO
CR2E031(7/97)	Examiner's initials T

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

(Name of registered agent)
hereby resigns as Registered Agent for <u>MELBOURNE INTERNATIONAL COMMUNICATIONS</u> , LTD. (Name of corporation)
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:
FELICIA HICKEY, ASST. SECRETARY OF CCOM
(Typed or Printed Name)
ASSISTANT SECRETARY OF CCOM (Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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