## Famo 0200

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(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE AHASSEE, FLORID

Ps stop A KOS/Inactive

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: ALL POINTS CAPITAL CORP.	
(Name	e of Corporation)
DOCUMENT NUMBER: F0000000200	
The enclosed Resignation of Registered Agent f	or a Corporation and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Brenda Carter	
(Name of Person)	<del></del>
National Corporate Research, Ltd.	
(Name of Firm/Company)	<del></del>
615 South DuPont Highway	
(Address)	<del></del>
Dover, DE 19901	
(City/State and Zip Code)	······································
For further information concerning this matter, p	please call:
Brenda Carter at	
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 AGENT6 JUL 31 PM 2:21 FOR A CORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of section	ons 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.	NATIONAL CORPORATE RESEARCH, LTD.
	(Name of Registered Agent)
hereby resigns as Registered Agent	for ALL POINTS CAPITAL CORP.
	(Name of Corporation)
F0000000200	
(Document Number, if known)	<del></del>
A copy of this resignation was mai	led to the above listed corporation at its last known address.
The agency is terminated and the o this statement is filed.	ffice discontinued on the 31st day after the date on which
4	layre Rafavelli
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Wayne Rafan	elli
	(Typed or Printed Name)
Vice Presiden	t ·
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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