## F000000001050

(F	Requestor's Name)	
	Address)	
(/	Address)	
(6	City/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nar	me)
(1	Document Number)	
Certified Copies	Certificates	s of Status
Special Instructions t	to Filing Officer:	
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Office Use Only



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LA Resign T. lewis



## \* CT CORPORATION

July 13, 2004

RE: CAPITALTHINKING, INC. (DE. DOM.)
DIRECT ONE, INC. (CA. DOM.)
ELCOTEL, INC. (DE. DOM.)

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporations. Also enclosed is <u>1</u> check in the amount of \$105.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

## Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:ld Enclosure

111 Eighth Avenue New York, NY 10011 Tel. 212 894 8940 Fax 212 590 9180

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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417 1500

Pursuant to the provisions of section	as 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, _	C T CORPORATION SYSTEM	
	(Name of Registered Agent) CAPITALTHINKING, INC. (DE. DOM.)	
hereby resigns as Registered Agent	for(Name of Corporation)	
F0000001050		
(Document Number, if known)	<del></del>	
A copy of this resignation was maile	ed to the above listed corporation at its last known address.	
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the date on which	
She	Uf	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
C T CORPO	RATION SYSTEM - THERESA ALFIERI	
	(Typed or Printed Name)	
	ASSISTANT SECRETARY	
	(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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