

FDD 000001377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

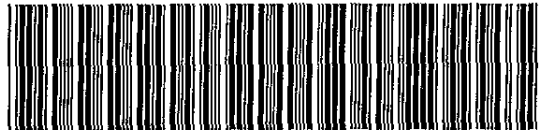
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500058766235

08/22/05--01046--016 **35.00

FILED
05 AUG 22 AM 11:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

7:58pm AUG 25 2005

RA Design

CT CORPORATION

August 15, 2005

RE: COMBUSTION PRODUCTS MANAGEMENT, INC (NY 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 1 check in the amount of \$35.00 to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclosed a stamped self-address envelope.

Very truly yours,

CT CORPORATION SYSTEM

Theresa Alfieri (ks)

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA:ks
enclosure

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

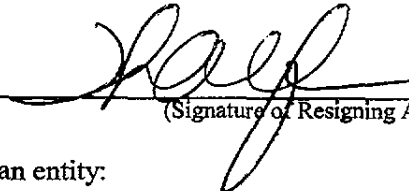
05 AUG 22 AM 11:46
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)
hereby resigns as Registered Agent for COMBUSTION PRODUCTS MANAGEMENT, INC
(NY DOM) (Name of Corporation)

F00000001377
(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:

C T CORPORATION 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withdrawn corporation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**