

F00000002030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

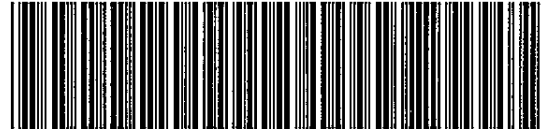
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000059853610

09/26/05--01031--017 \*\*70.00

FILED  
05 SEP 26 AM 7:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*R.A. Resign*

G. Gentile SEP 30 2005

**CT CORPORATION**

September 19, 2005

RE: ALEXANDER MANUFACTURING, INC. (OR.DOM.)  
LIFEGUARDIAN (OH.,DOM.)

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL. 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 1 check in amount of \$70.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

*Theresa Alfieri(uk)*

*Theresa Alfieri*

Senior Supervisor & Assistant Secretary

111 Eighth Avenue  
New York, NY 10011  
Tel. 212 875-8940  
Fax 212 590 9180

Enclosure

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

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

Florida Statutes, the undersigned, CT CORPORATION SYSTEM  
(Name of Registered Agent)

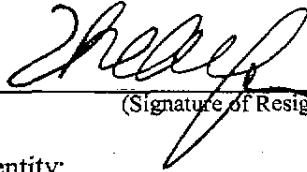
hereby resigns as Registered Agent for ALEXANDER MANUFACTURING, INC. (OR.DOM.)  
(Name of Corporation)

#F00000002030

(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:

CT CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

FILED  
05 SEP 26 AM 7:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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withdrawn corporation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