F0200003427

	•	
(Requ	estor's Name)	
(Addre	ess)	
(Addre	ee)	
(/ Wall	,30)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	ne)
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(Dogu	ment Number)	·
(0004)	ment Namber)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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09/10/14--01028--014 **35.00



CT Corporation

111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.cteorporation.com

September 2, 2014

RE: HILLSIDE SERVICES, INC. (IL. 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 each of the above corporations. Also enclosed is 1 check in the amount of \$35.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure 14 SEP 10 PH 2: 35

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
1 1 1 2 D 1 1 1 A	HILLSIDE SERVICES, INC. (IL. DOM.)	
hereby resigns as Registered Agent for	(Name of Corporation)	,
F02000003427		
(Document Number, if known)		
A copy of this resignation was mailed t	o the above listed corporation at its last know	vn address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date of	on which
(Si	gnature of Resigning Agent)	FR A Th
If signing on behalf of an entity:		PIO P
C T CORPORA	ΓΙΟΝ SYSTEM - THERESA ALFIERI	PH 2
	Typed or Printed Name)	2: 35
AS	SISTANT 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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