F02000003957

(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:	7

Office Use Only



500045702765



02/02/05--01042--017 **87.50

4020000 ph/05

CT CORPORATION

January 28, 2005

RE: PMSI SOUTHEAST, INC. (GA.DOM.)

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314 DS FEB -4 AM 8: 23

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is <u>1</u> check in amount of \$87.50 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (lk)

Senior Supervisor & Assistant Secretary

TA/lk Enclosure

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 6	07.1509, or 617.1	509,			
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM					
	(Name of Registered Agent)					
hereby resigns as Registered Agent for	PMSI SOUTHEAST, INC.					
	(Name of Corporation)					
F02000003957						
(Document Number, if known)	_					
A copy of this resignation was mailed to	·		~ <u>.</u>			
The agency is terminated and the office this statement is filed.	discontinued on the 31st d	ay after the date o	HACKER OF THE MENT	_		
(Si	gnature of Resigning Agent)		ARY OF SSEE, F			
If signing on behalf of an entity:	V		8: 24 STATE LORIO:	D		
C T CORPORAT	TION SYSTEM - THERESA	ALFIERI				
	Typed or Printed Name)					
ASS	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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