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(Re	questor's Name)	
bA)	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	····
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TALLAHASSEE, FLORIGA JO PAS.

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 15, 2005

CHARLOTTE WALET 911 MARK DRIVE CLEARWATER, FL 33756

SUBJECT: CLEARWATER CUSTOM FLOORS, INC.

Ref. Number: F03000002079

We have received your document for CLEARWATER CUSTOM FLOORS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

There is a balance due of \$62.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 605A00056718

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Clearwater Custom Floris
DOCUMENT NUMBER: <u>F0300002019</u>
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return-all correspondence concerning this matter to the following: (Name of Person)
(Name of Firm/Company)
all Mark Dive
Clear waty Cl. 3375% (City/State and Zip Code)
For further information concerning this matter, please call: (Name of Person) at (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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, (Name of Registered Agent),
hereby resigns as Registered Agent for
P030000 3079 (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:
Charlo He Water Typed or Printed Name) (Typed or Printed Name)
(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