## F0500000544

(Requestor's Name)		
(Agdress)		
(Address) (City/State/Zip/Phonel#)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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KA Resign

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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11 DEC 2	29	PH

Pursuant to the provisions of sections 66	07.0502(2), 617.0502(2), 607.1509, or 617.1509, LAHA		
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	SPI FIELD FORCE, INC. (CA. DOM.)		
	(Name of Corporation)		
F05000005447			
(Document Number, if known)	<del></del>		
A copy of this resignation was mailed to	the above listed corporation at its last known address.		
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which		
_ M	lel e		
(Sig	gnature of Resigning Agent)		
If signing on behalf of an entity:			
C T CORPORAT	ION 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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