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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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MAY 2 5 2012 T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	109161	a	Ontario,	Inc.	_	
			(Name of Cor	poration)		
DOCUMENT N	UMBER:	Fa	9600000	1380		

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:

Kristine L Huseman (Name of Person)

(Name of Firm/Company)

3733 University Blud W, Ste 305A (Address)

Jack Sonville FL 32217 (City/State and Zip Code)

For further information concerning this matter, please call:

Kristine L. Huseman at (904) 448-5552 (Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, <u>William R. HUSeman, PA</u> (Name of Registered Agent)
hereby resigns as Registered Agent for 1091612 Ontario, Inc. (Name of Corporation)
FOLOOCO 4380 (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.
If signing on behalf of an entity:
(Typed or Printed Name)
President
(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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