## F06000004936

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	: #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne) .		
(Document Number)				
Certified Copies	_ Certificates	of Status,		
Special Instructions to	Filing Officer:			

Office Use Only



600171595616

Osignation Os/12/10-01019-024 \*\*35.00

> FILED 2010 MAR 12 AM 9: 55 SECRETARY OF STATE

ADR 3/15/10

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: ARCHER/LONGBOW, CORP. / CROSS REF. NAME : ARCHER CORPORATION (Name of Corporation)
DOCUMENT NUMBER: F06000004936
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:
MAGGIE HOPE
(Name of Person)
HIQ CORPORATE SERVICES, INC.
(Name of Firm/Company)
715 SAINT PAUL STREET
(Address)
BALTIMORE, MD 21202
(City/State and Zip Code)
For further information concerning this matter, please call:
MAGGIE HOPE at (410 ) 752-8030 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED

## RESIGNATION OF REGISTERED AGENT MAR 12 AM 9:55

Pursuant to the prov	isions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617	7.1509, LORIDA
Florida Statutes, the	undersianed HI	Q CORPORATE SERVICES, INC.	
riorida Statutes, tile	undersigned,	(Name of Registered Agent)	
hereby resigns as Re	egistered Agent for	ARCHER/LONGBOW, CORP. (Name of Corporation)	,
F06000004936			
(Document Nu	mber, if known)	_	
A copy of this resign	nation was mailed to	o the above listed corporation at its last kno	own address.
The agency is terming this statement is file		discontinued on the 31st day after the date	on which
_	(Sig	gnature of Resigning Agent)	•
If signing on behalf	of an entity:		
	MAGGIE HOPE		
	(	Typed or Printed Name)	•
	ASSISTANT SEC	RETARY .	
		(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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 Taliahassee, FL 32314