## POUDODOUNDE

<u>)</u>	
(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





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12/21/10--01003--008 \*\*140.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

RES

December 14, 2010

RE: COMARK BUILDING SYSTEMS, INC. (DE. DOM.)
FIDELITY MORTGAGE DECISIONS
CORPORATION. (IL. DOM.)
GET GOLD CASH, INC. (MD. DOM.)
GULF PACIFIC MANAGEMENT
CONSULTANTS, INC. (CA. DOM.)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

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 the amount <u>140..00</u> to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 61	17.1509,	
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	/	
	(Name of Registered Agent)		-
hereby resigns as Registered Agent for	COMARK BUILDING SYSTEMS, INC.	(DE. DOM.)	
	(Name of Corporation)		_,
F06000006402			
(Document Number, if known)	<del></del>		
A copy of this resignation was mailed to	o the above listed corporation at its last ki	nown address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the day	te on which	
$\mathcal{M}$	ay		
(Si	gnature of Resigning Agent)	<del></del>	
If signing on behalf of an entity:	0	101	SEVID
C T CORPORAT	ΓΙΟΝ SYSTEM - THERESA ALFIERI	DEC 2 _	CRETA ION OF
(Typed or Printed Name)			82.5
		7	70 C
AS	SISTANT SECRETARY	ယ္	S IAT DRAI
-	(Capacity)		ENS.

## 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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