15070000109

(Requestor's Name) II Eighth Ave (Address) (Address)	500134069425	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	08/08/0801041902 **262.50	
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Office Use Only

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	·
hereby resigns as Registered Agent for	CREATIVE MANAGEMENT SOLUTIONS, (W	INC. /Y_DOM.)
	(Name of Corporation)	
F07000001409		
(Document Number, if known)	_	
A copy of this resignation was mailed to	o the above listed corporation at its last kno	wn address.
this statement is filed.	discontinued on the 31st day after the date	on which
If signing on behalf of an entity:	gnature of Resigning Agent)	
C T CORPORAT	TION SYSTEM - THERESA ALFIERI	
	Typed or Printed Name)	
AS	SISTANT SECRETARY	2000 AUG -8 SECRETAR
	(Capacity)	PS - S
Fee for filin	g this document:	B PM 5: SEE, FLOO

\$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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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