

## F10000001109

(R	equestor's Name)			
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## **COVER LETTER**

	(Name of Person) (Area Code & Daytime Telephone Number)
Mark O.	(Name of Person) at (407) 647-9550 ext. 103 (Area Code & Daytime Telephone Number)
For furthe	er information concerning this matter, please call:
	(City/State and Zip Code)
Winter F	Park, Florida 32789
	· ·
2099 LE	ee Road, Suite 320 (Address)
260017	on Road, Suito 320
	(Name of Firm/Company)
O'Neill,	Liebman & Cooper, P.A.
	(Name of Person)
Mark O	2. Cooper, Esquire
Please ret	turn all correspondence concerning this matter to the following:
	osed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
OCUM	IENT NUMBER: F10000001109
OBJEC	(Name of Corporation)
was to a	Hawk Systems Inc
D	ivision of Corporations

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ns 607.0502(2), 617.0502(2), 607.1509, o	r 617.1509,
Florida Statutes, the undersigned, _	Michael Diamant	
	(Name of Registered Agent)	
hereby resigns as Registered Agent	for Hawk Systems, Inc.	
The state of the s	(Name of Corporation)	
F10000001109		
(Document Number, if known)		
A copy of this resignation was maile	ed to the above listed corporation at its las	st known address.
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the	date on which
·	Victoral Warnant	<b>-</b> ₩
	(Signature of Resigning Agent)	7 S
If signing on behalf of an entity:		
		FILED 30 AM
	(Typed or Printed Name)	
		50 100 100 100 100 100 100 100 100 100 1
	(Capacity)	<del></del>
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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