1633 Broadway New York, NY 1001 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time ☐ Walk in Certified Copy Photocopy ☐ Will wait Mail out Certificate of Status NEW FILINGS AMENDMENTS. Profit Amendment NonProfit Resignation of R.A. Officer/ Director Limited Liability Change of Registered Agent 500002206925--1 -06/10/97--01012--009 *****35.00 *****35.00 Domestication Dissolution/Withdrawal Other **Merger** OTHER FILINGS REGISTRATION/ **QUALIFICATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation

Reinstatement Trademark

Other

Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

97 JUN 10 AH 9: 38
SECRETARY OF STATE
LAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT

Fursuant to the provisions	of sections 607.0502(2)	or 607.1509, Florida Statues, the
undersigned,CTCORPC		hereby resigns as
(nam	e of registered agent)	
Registered Agent for	COMMUNITY VILLA	AGE INC.
	(name of corpo	
ORGANIZED UNDER THE LAW	•	FLORIDA
650 Fifth Avenu	iss & Moskowitz, P.C.	isted corporation at its last known
The agency is terminated a which the statement was file	nd the office discontinue ed.	d on the 31st day after the date on
		SIGNATURE SSISTANT SECRETARY

FEE FOR FILING THIS DOCUMENT:
\$87.50-Active Corporation
\$35.00-Administratively Dissolved Corporation