

# F94000002280

**CT CORPORATION SYSTEM**

Office Use Only

**CO** 1633 Broadway  
New York, NY 10019

**R(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

**FILED**  
 98 SEP 21 PM 2:30  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

- Walk in     
  Pick up time \_\_\_\_\_     
  Certified Copy  
 Mail out     
  Will wait     
  Photocopy     
  Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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 -09/21/98-01087--014  
 \*\*\*\*\*35.00 \*\*\*\*\*35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

W  
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 F94000002280  
 RA Res 208

Examiner's Initials	
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Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statutes,

undersigned, C T CORPORATION SYSTEM hereby resigns (name of registered agent)

Registered Agent for RYAN-MURPHY INCORPORATED (name of corporation)

ORGANIZED UNDER THE LAWS OF THE STATE OF COLORADO

98 SEP 21 PM 2:30 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

A copy of this resignation was mailed to the above listed corporation at its last known address.

11912 N. Washington Northglenn, Co. 80233 Attn: Bruce Hisson President

The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.

[Signature] SIGNATURE ASSISTANT SECRETARY

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