

# F94000005067

Akerman Senterfitt & Eidson, P.A.

Requestor's Name

P.O. Box 10555

Address

Tallahassee FL 32302-2555

City/State/Zip

Phone #

222-3473

RECEIVED

98 FEB -7 AM 10:20

STATE OF FLORIDA  
DIVISION OF REVENUE  
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Ocean Manor, Inc. F94000005067  
(Corporation Name) (Document #)

2. \_\_\_\_\_ 8000002001178-4  
(Corporation Name) (Document #)

02/07/97-01024-013  
\*\*\*\*\*87.50 \*\*\*\*\*07.50

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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

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

FILED  
 97FEB-7 PM 2:30  
 TALLAHASSEE, FLORIDA

N. HENDRICKS FEB - 7 1997

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

## RESIGNATION OF REGISTERED AGENT

FILED  
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TALLAHASSEE, FLORIDA

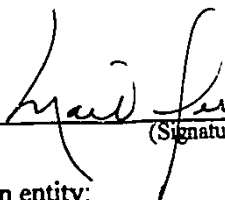
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Mark Herron  
(Name of registered agent)

hereby resigns as Registered Agent for Ocean Manor, Inc.  
(Name of corporation)

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

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

  
(Signature of resigning agent)

If signing on behalf of an entity:

Akerman, Senterfitt & Eidson, P.A.  
(Typed or Printed Name)

Managing Shareholder  
(Capacity)

**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation