F9400000 4144

Ot Ayus Soviae (Requestor's Name)		
(Requestor's Name)		
11 Eighth Are (Address)		
(Address) (Address) (Address)		
(City/State/Zip/Phone #)		
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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: EAGLE INVESTIGATIONS, INC. (KY. DOM.)	
(Name of Corporation)	
DOCUMENT NUMBER: F94000006144	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing	
Please return all correspondence concerning this matter to the following:	
THERESA ALFIERI	
(Name of Person)	•
C T CORPORATION SYSTEM	
(Name of Firm/Company)	
111 8TH AVENUE - 13TH FLOOR	
(Address)	
NEW YORK, NEW YORK 10011	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
THERESA ALFIERI at (212) 894 - 8516	
THERESA ALFIERI at (212) 894 - 8516 (Name of Person) (Area Code & Daytime Telephone Number)	***
	.•

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E046(11/02)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607	7.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM
Tiorida Sacatos, ate arcersigned,	(Name of Registered Agent)
hereby resigns as Registered Agent for _	EAGLE INVESTIGATIONS, INC. (KY. DOM.) (Name of Corporation)
F9400006144	
(Document Number, if known)	<u>-</u>
A copy of this resignation was mailed to	the above listed corporation at its last known address.
The agency is terminated and the office d this statement is filed.	iscontinued on the 31st day after the date on which
	ature of Resigning Agent)
If signing on behalf of an entity:	ARE OF LEASE
C T CORPORA	TION SYSTEM - Theresa Alfieri
(T)	yped or Printed Name)
ASSI	STANT SECRETARY
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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