

F95000001934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

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11/24/04--01020--022 **35.00

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04 NOV 24 PM 12:51

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

F95000001934
PA RUS
BPR
11-24-04
50-42-11
W

CT CORPORATION

November 16, 2004

RE: FLEMING PACKAGING CORPORATION (DE. DOM.)

FILED
04 NOV 24 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Secretary of State
Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Dear Sir: or Madam;

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is 1 check in the amount of \$35.00 to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (nh)

Theresa Alfieri
Assistant Secretary
TA:nh
Encl.

111 Eighth Avenue
New York, NY 10011
Tel. 212 894 8940
Fax 212 590 9180

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

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

Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)

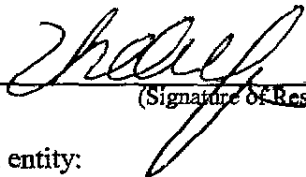
hereby resigns as Registered Agent for ELEMING PACKAGING CORPORATION
(Name of Corporation)

F95000001934

(Document Number, if known)

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:

C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

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04 NOV 24 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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withdrawn corporation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**