

F95000003806

FLORIAN FRING PAUL

Requestor's Name

Address

668-4318

City/State/Zip

Phone #

Office Use Only

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 NOV -3 PM 2:11

FILED

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

1. ASTON MANAGEMENT CORPORATION
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

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

600002679386--3
-11/03/98--01075--012
*****87.50 *****87.50

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

RECEIVED
98 NOV -3 PM 2:08
DIVISION OF CORPORATION

Examiner's Initials

See 11/4

RESIGNATION OF REGISTERED AGENT

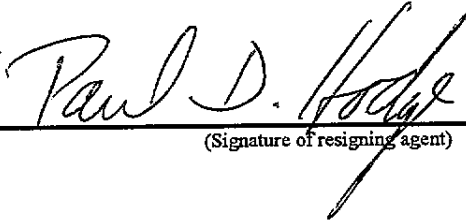
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), OR 617.1509,
Florida Statutes, the undersigned, **FLORIDA FILING & SEARCH SERVICES, INC.**
hereby resigns as Registered Agent for **ASTON MANAGEMENT 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:

FLORIDA FILING & SEARCH SERVICES, INC.
(Typed or Printed Name)

PRESIDENT
(Capacity)

Fee for filing this document:

\$87.50 – Active corporation

\$35.00 – Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314