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6 3						
	Re	Requestor's Name				
		Address				
	City/State	/Zip	Phone #		Office Use Only	
	CORPORATION	NAMI	E(S) & DOCUMENT NU	MBER(S), (if known):	
	1. <u>(Cor</u>	poration l	Name) (1	Document	#)	
	2(Cor	poration l	Name) (I	Document	#)	
	3. <u>(Cor</u>	poration	Name) (I	Document	#)	
	4. <u>(Cor</u>	poration]	Name) (1	Document	#)	
	☐ Walk in	☐ Picl	c up time		Certified Copy	
	Mail out	□ will	wait Photocopy		Certificate of Status	
AUTO	NEW FILINGS		AMENDMENTS			
	Profit		Amendment		800002680138——3 -11/04/9801050009 *****87.50 *****87.50	
	NonProfit	4	Resignation of R.A., Officer/Di	rector	**************************************	
	Limited Liability		Change of Registered Agent			
	Domestication		Dissolution/Withdrawal			
	Other		Merger			
aconi						
	OTHER FILINGS		REGISTRATION/			
	Annual Report	Total San San San	Foreign			
<u>.</u>	Fictitious Name		Limited Partnership	-		
	Name Reservation		Reinstatement		11-6-98	
		-	Trademark		11-	
			Other] .		

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, ANGELA RENEE CARVER (Name of registered agent)
hereby resigns as Registered Agent for EUROSPORT MARINE, 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:
ANGELA RENEE CARVER (Typed or Printed Name)
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation