| Therasa Ollesi Requesters Name Ct Corporation Sur Address 111 Eighly aug. City/State/Zpp Phon | 5764 Ten ne# |
|---|---|
| ny , ny 10011 | |
| | Office Use Only |
| CORPORATION NAME(S) & DO | CUMENT NUMBER(S), (if known): |
| 4 | |
| 1. (Corporation Name) | (Document #) |
| | |
| 2. (Corporation Name) | (Document #) |
| | |
| 3. (Corporation Name) | (Document #) |
| (Corporation France) | |
| 4 | -08/81/0081070827 *****35 00 *****35 0 |
| (Corporation Name) | (Document #) |
| ☐ Walk in ☐ Pick up time | e Certified Copy |
| ☐ Mail out ☐ Will wait | Photocopy |
| ATAMAA V WV | - Common of Smill |
| NEW FILINGS | AMENDMENTS |
| ☐ Profit | ☐ Amendment |
| Not for Profit | Resignation of R.A., Officer/Director |
| ☐ Limited Liability ☐ Domestication | Change of Registered Agent |
| Other | Dissolution/Withdrawal Merger |
| | |
| OTHER FILINGS | REGISTRATION/QUALIFICATION |
| Annual Report | Foreign |
| ☐ Fictitious Name | Limited Partnership |
| | Reinstatement RA Messeg. Trademark |
| | Other Works |
| | V. SHEPARD AUG 8 2000 |
| | Examiner's Initials |

CR2E031(7/97)

OIVISION OF TARY OF STATE OF STATE AMIL: 47

RESIGNATION OF REGISTERED AGENT

| Pursuant to the provisions of sections 607.050 | 2(2), 617.0502(2), 607.1509, o | r 617.1509, | |
|--|--|-------------------|--------|
| Florida Statutes, the undersigned, C T C | ORPORATION SYSTEM (Name of registered agent) | <u> </u> | |
| hereby resigns as Registered Agent for | TEAM CONTROLS, INC | . (TX. DOM. | .) |
| | (Name of corporation) | | |
| A copy of this resignation was mailed to the a | bove listed corporation at its las | st known address. | |
| The agency is terminated and the office discorthis statement is filed. | ntinued on the 31st day after the | e date on which | |
| he a | lfu | · | |
| If signing on behalf of an entity: | of resigning agent) | | |
| * | ORATION SYSTEM or Printed Name) | | |
| ASSISTANT | SECRETARY | <u> </u> | * 5.4j |
| | (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