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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(8)	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



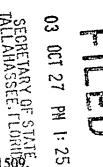
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10/28/03--01074--001 **140.00

O3 OCT 27 PN 1: 29 SECRETARY OF STATE

W/0/31

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, CT CORPORATION SYSTEM (Name of registered agent)
CLOVER TECHNOLOGIES, INC. (ML DOM.)
hereby resigns as Registered Agent for(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:
C T CORPORATION SYSTEM - Theresa Alfieri (Typed or Printed Name)

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

ASSISTANT SECRETARY (Capacity)

CR2E046(9/98)