## F97000004719

(Requestor's Name)			
III Eighth Ave (Address)			
NRWYDVR WY 10011 (Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Boourne Harrison)			
Certified Copies Certificates of Status			
•			
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03/24/09--01034--007 \*\*175.00

2009 MAR 24 PH 12: 09
SECRETARY OF STATE

R.A. Resign.
TB 3/24/09

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

ZOOS MAR 24 PM 12: 09
TALLAHASSEE. FLORIOA ovisions of sections 607 0502(2), 617 0502(2), 607 1509, or 617 1509

i ursuant to the provisions of sections of	07.0302(2), 017.03	02(2), 007.1309, 01 017.1309,
Florida Statutes, the undersigned,hereby resigns as Registered Agent for	C T CORPORATION SYSTEM	
	(Name	of Registered Agent)
	EYT EAST, INC.	(DE. DOM.)
	(Na	me of Corporation)
F97000004719		
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed t	o the above listed c	orporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on th	e 31st day after the date on which
<u> </u>	elle	
— (Si	gnature of Resigning A	agent)
If signing on behalf of an entity:	V	
C T CORPORA	ΓΙΟΝ SYSTEM - TH	IERESA ALFIERI
	Typed or Printed Nam	e)
AS	SISTANT SECRETA	ARY
	(Capacity)	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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