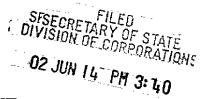
	Requester's Name		OPZILLIN 44 PARTITIONS
- //	heresa Alfic	eri	3. £0
- C.	+ corporati	on System	
1	11 Eighth A	tve.	
cc /	11 Eighth F Iew York, N	4 10011 R(S),	Office Use Only (if known):
1	(Corporation Name)	(Document#)	-000005757280 -06/14/0201050012 *****35.00 ******35.
2	(Corporation Name)	(Document #)	<del></del> -
3	(Corporation Name)	(Document #)	
4	(Corporation Name)	(Document #)	· · ·
☐ Wa	lk in Pick up ti	ne	Certified Copy
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	LINGS	AMENDMENTS	
NEW FI	LIII GB	<u>—</u>	
NEW FI Prof Not Limit	it for Profit ited Liability aestication	Amendment Resignation of Change of Reg Dissolution/Wi Merger	
NEW FI Prof Not Limi Dom Othe	it for Profit ited Liability aestication	Resignation of Change of Reg Dissolution/Wi Merger	istered Agent



## 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		-1
SEAL-DRY/U.S.A., INC. (DE. DOM.) (F97000006055)	••	
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.		e na e e e
The Opp .		- 
(Signature of resigning agent)		
If signing on behalf of an entity:	·	
C T CORPORATION SYSTEM - Theresa Alfieri (Typed or Printed Name)	t vante	
ASSISTANT SECRETARY (Capacity)		- <del></del>

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

CR2E046(9/98)