## -97000006847

(Requestor's Name)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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10/26/10--01040--010 \*\*175.00

OCT 2 7 2010

**EXAMINER** 



111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

October 18, 2010

RE: MEDIQ EQUIPMENT & MAINTENANCE SERVICES, INC. (DE. DOM.)
NETTOUCH COMMUNICATIONS, INC. (TX. DOM.)
NUCLEAR SUPPORT SERVICES, INC. (VA. DOM.)
SPIRIT RENT-A-CAR, INC. (OH. DOM.)
STRUCTURAL SYSTEMS TECHNOLOGY, INC. (VA. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is  $\underline{1}$  check in the amount of  $\underline{\$175.00}$  to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,hereby resigns as Registered Agent for	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
	SPIRIT RENT-A-CAR, INC. (OH. DOM.)	
	(Name of Corporation)	,
F97000006847		
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed t	to the above listed corporation at its last known address.	
The agency is terminated and the office	e discontinued on the 31st day after the date on which	
this statement is filed.	a disconnica on the processing three vite and on which	
Jan.	all	
(Si	ignature of Resigning Agent)	
If signing on behalf of an entity:		
	TION SYSTEM - THERESA ALFIERI	10 10
	(Typed or Printed Name)	VISION OF C
	ŗ	し、地位
AS	SSISTANT SECRETARY	الا
	(Capacity)	300
	<u>?</u> :	130
	<b>20</b>	ATE
		-

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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