

F99000001551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Resignation to
RA

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

12 JAN 23 AM 10:56

RECEIVED

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 JAN 23 PM 3:07

ASR
1/23/12



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 066933 7819783

AUTHORIZATION

COST LIMIT \$ 35.00

Lyndee Allen

ORDER DATE : January 19, 2012

ORDER TIME : 9:38 AM

ORDER NO. : 066933-095

CUSTOMER NO: 7819783

FOREIGN FILINGS

NAME: CI2, INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER: _____

FILED

RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION

2017 JAN 23 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, TCS Corporate Services, Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for

CI2, Inc.

(Name of Corporation)

F99000001551

(Document Number, if known)

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:

Keith Nichols

(Typed or Printed Name)

Vice President

(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withdrawn corporation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