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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT RESIGNATION UTRECHT MANUFACTURING CORPORATION

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: UTRECHT MANUFACTURING CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: F99000002700

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Helen Mac-Tran

(Name of Person)

C T CORPORATION SYSTEM

(Name of Firm/Company)

111 8th Avenue, 13th Floor

(Address)

New York, New York 10011

(City/State and Zip Code)

For further information concerning this matter, please call:

Helen Mac-Tran

_{at} 212 \590-9118

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Malling Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sect	tions 607.0502(2), 617.0502(2), 607.1509, or 617.1	1509,
Florida Statutes, the undersigned	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
hereby resigns as Registered Age	ant for UTRECHT MANUFACTURING CORPO	ORATION
norday resigns as reegistered rige	(Name of Corporation)	
F99000002700		
(Document Number, if known)		
A copy of this resignation was m	ailed to the above listed corporation at its last know	vn address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date of	on which
ſ	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
CT CORPC	PRATION SYSTEM-Helen Mac-Tran (Typed or Printed Name)	16 JUL 27
ASSISTA	NT SECRETARY (Capacity)	
: : 	er filing this document:	10800A 8: 18

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

\$87.50 - Active Corporation