## 680794

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TALLAHASSEE FLORIDA

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## **COVER LETTER**

SUBJECT: Sprout Delights, Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: G80794	
The enclosed Resignation of Registered Agent for a Corporation and fee are su	ibmitted for filing.
Please return all correspondence concerning this matter to the following:	
Lawrence D. Goodman, Esq.	
(Name of Person)	-
Devine Goodman Pallot & Wells, P.A.	
(Name of Firm/Company)	· <del></del> • · · ·
777 Brickell Avenue, Suite 850	
(Address)	•
Miami, FL 33131	
(City/State and Zip Code)	•
For further information concerning this matter, please call:	
Lawrence D. Goodman at ( 305 ) 374-8200	
(Name of Person) (Area Code & Daytime Telepho	ne Number)

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Mailing 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 sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Lawrence D. Goodman (Name of Registered Agent)
hereby resigns as Registered Agent for Sprout Delights, Inc.  (Name of Corporation)
G80794
(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.
If signing on behalf of an entity:  (Signature of Resigning Agent)  ACS  CONTROL  (Typed or Printed Name)
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withdrawn corporation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