H67787

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations
SURJECT: Last Chance Thriff Stores. INC
DOCUMENT NUMBER: H 67787
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:
Tom Pease
Pease + Mundinser P.A. (Name of Firm/Company)
29605 US 19, Svite 130
Clearwater Florida 33761 (City/State and Zip Code)
For further information concerning this matter, please call:
Tom Pease at (727) 785-7460 (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 co

rporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, Samuel L. Roberts	
(Name of Registered Agent)	
hereby resigns as Registered Agent for Last Chance Thiff Stores, INC,	•
(Name of Corporation)	
H67787	
(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.	
JUN 26	
(Signature of Resigning Agent)	
	T
If signing on behalf of an entity:	
RAIE -	
A	
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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