

588 646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

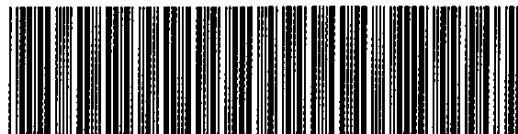
(Business Entity Name)

(Document Number)

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08/22/07--01022--002 **87.50

PA Resign

FILED
07 AUG 22 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts AUG 27 2007

TO: Amendment Section
Division of Corporations

(Name of Corporation)

(Name of Person)

(Name of Firm/Company)

(Address)

(City/State and Zip Code)

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

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

CR2E046(08/05)

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

FILED
07 AUG 22 AM 8:50
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, Peter M. Commette, Esquire

(Name of Registered Agent)

hereby resigns as Registered Agent for Cabo Rico Yachts, Inc.

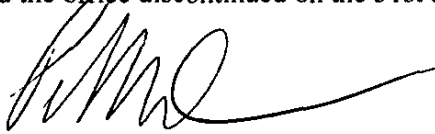
(Name of Corporation)

J88646

(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:

(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withdrawn corporation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