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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	ECT: BARON INVESTMENT CORPORATION OF NAPLES
	(Name of Corporation)
DOC	UMENT NUMBER: K51065
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
CYN	ITHIA Z. JORGENSEN
	(Name of Person)
QUA	ARLES & BRADY LLP
	(Name of Firm/Company)
411	E. WISCONSIN AVENUE, SUITE 2040
	(Address)
MILV	WAUKEE, WI 53202
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
CYN	THIA Z. JORGENSEN  (Name of Person)  at (414 ) 277-5191  (Area Code & Daytime Telephone Number)
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Cliffon 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, NAPLES-LAWDOCK, INC. (Name of Registered Agent)	_	
hereby resigns as Registered Agent for Baron Investment Corporation of Naples  (Name of Corporation)		
K51065		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last known addres	s.	
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:		
CYNTHIA Z. JORGENSEN  (Typed or Printed Name)	OISIVID ROSEVID	
ASSISTANT SECRETARY	FILE F CO	
(Capacity)	CRAIN AN	

## 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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