Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

To:		
10.	Division of Corporations	12
	Fax Number : (850)617-6380	<i>₩</i> = ~

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144
Phone : (305)520-2344
Fax Number : (305)520-2400

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

Email Address:\_\_\_\_\_

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From:

## REGISTERED AGENT RESIGNATION CODINA DEERING, INC.

Certificate of Status	0
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Page Count	03
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#667 P.002/003

**COVER LETTER** 

TO: Amendment Section Division of Corporations				
SUBJECT: CODINA DEERING, INC.				
(Name of Corporation)				
DOCUMENT NUMBER: K99438				
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:				
KOLLEEN O COBB				
(Name of Person)				
FLORIDA EAST COAST INDUSTRIES, LLC				
(Name of Firm/Company)				
2855 LE JEUNE ROAD., 4TH FL				
(Address)				
CORAL GABLES, FL 33134				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
BRENDA JOHNSON at (305 ) 5202427				
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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

From:

#667 P.003/003

From:

## 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, KOLLEEN O COBB			
(Name of Registered Agent)			
hereby resigns as Registered Agent for CODINA DEERING, INC.	Э.		
(Name of Corporation)			
K99438			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last known	wn add	iress.	
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	on whi	ich	
(Signature of Resigning Agent)			
If signing on behalf of an entity:	22		
KOLLEEN O COBB	OIT APR		
(Typed or Printed Name)	R 26	7	
REGISTERED AGENT		FILED	
(Capacity)	群10:20		
	0		

## 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