

L00809

Requester's Name <b>BENNETT</b> 635 VIZNAR CORAL GABLES, FL 33143	
City/State/Zip	Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 100005313351--7  
-04/22/02--01064--018  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☒ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

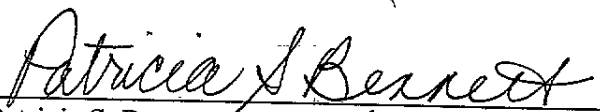
FILED  
02 APR 22 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

AC4/25

## OFFICER / DIRECTOR RESIGNATION

I, Patricia S. Bennett, hereby resign as President and Director of the Bennett Agency, Inc.,  
a corporation organized under the laws of the State of Florida and affirm that the corporation has  
been notified in writing of the resignation.

  
Patricia S. Bennett 3/1/01

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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