

M. Bradley Luczak  
 Requestor's Name  
 Soberino White Luczak  
 20 South Orange Ave Apt 2007  
 Address  
 Orlando FL 32801  
 City/State/Zip Phone #

**L53680**

Office Use Only

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

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

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 09 APR 23 PM 1:50  
 SECRETARY OF STATE  
 PALM HARBOR, FLORIDA

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

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

300002849879--9  
 -04/23/99--01091--004  
 \*\*\*\*\*735.00 \*\*\*\*\*35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

MW  
 L53680  
 208 APR 23 1999

Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

**RESIGNATION OF REGISTERED AGENT**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Sobering, White & Luczak, P.A. f/k/a Sobering & Gray, P.A.  
(Name of registered agent)

hereby resigns as Registered Agent for Herrick Southeast, Inc.  
(Name of corporation)

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 this statement is filed.

M.B. [Signature]  
(Signature of resigning agent)

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TALLAHASSEE, FLORIDA

If signing on behalf of an entity:

M. Bradley Luczak  
(Typed or Printed Name)

Vice President, Sobering, White & Luczak, P.A. f/k/a Sobering & Gray, P.A.  
(Capacity)

**Fee for filing this document:**  
\$87.50 - Active corporation  
\$35.00 - Administratively dissolved corporation