L66174

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TRANSMITTAL LETTER

	mendment Section ivision of Corporations
SUBJEC	CT: Gallery Of The Eccentric, Inc. (Name of Corporation)
DOCUM	IENT NUMBER: L66174
The enclo	osed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please ret	turn all correspondence concerning this matter to the following:
Michae	el Basile, Esq.
	(Name of Person)
Strooc	k & Stroock & Lavan LLP
	(Name of Firm/Company)
200 So	uth Biscayne Blvd., Suite 3160
	(Address)
Miami,	FL 33131-5323
	(City/State and Zip Code)
For furthe	er information concerning this matter, please call:
Michae	l Basile at (305) 789-9350
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.150	19,		
Florida Statutes, the undersigned, Stroock & Stroock & Lavan LLP (Name of Registered Agent)		-	
hereby resigns as Registered Agent for Gallery Of The Eccentric, Inc. (Name of Corporation)		_,	
L66174			
(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 v	which		
this statement is filed. What Ballo (Signature of Resigning Agent)			
If signing on behalf of an entity:			
Michael Basile (Typed or Printed Name)			
(Typed of Timed Name)	<u> </u>		
Partner	ALLA	05 SE	
(Capacity)	HASSEE, F	P-7 PM	
Fee for filing this document:		డ్లు	つ
\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/	部	0	
NATION AUDITORIZATIVE VICEOUPE (VALUE COUPE)	-		

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

withdrawn corporation