L79716

>		
(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
· (Doo	cument Number)	
	- um .	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
_		

Office Use Only



400057187504



07/13/05--01030--006 **35.00

PHROS CHO-1/18

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: NAMES FOR DAMES SARASOTA, INC.		
(Name of Corporation)		
DOCUMENT NUMBER: L79716		
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:		
Brenda Carter		
(Name of Person)		
National Corporate Research, Ltd.		
(Name of Firm/Company)		
615 South DuPont Highway		
(Address)		
Dover, DE 19901		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Brenda Carter at (800) 483-1140		
Brenda Carter at (800) 483-1140 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		

27

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of	sections 607.0502(2), 617.0502(2), 607.1	509, or 617.1509,
Florida Statutes, the undersig	ned, NATIONAL CORPORATE RES	
hereby resigns as Registered	Agent for NAMES FOR DAMES SAF	
L79716		
(Document Number, if kno	own)	. .
A copy of this resignation wa	s mailed to the above listed corporation a	t its last known address.
The agency is terminated and this statement is filed.	the office discontinued on the 31st day at	fter the date on which
Way	(Signature of Resigning Agent)	
If signing on behalf of an enti	ty:	TALLER JU
Wayne F	Rafanelli	25 T
	(Typed or Printed Name)	SEE REAL
Vice Pres	sident	FL R
	(Capacity)	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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