City/State/2.5 Phone #	Requester's Na	26	5	5	9	
No Return	City/State/Zap	Phone #				

Office Use Only

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

1. (Corporation Name)	(Document #)
2. (Corporation Name)	(Document #) 20083463172-3 -11/17/00-01030-002 *****87.50 ******43.75
3. (Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
Walk in Mail out Pick up time Will wait NEW FILINGS	Photocopy Certified Copy S Certificate of Status AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

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, <u>William A. EAST</u>	
(Name of registered agent)	
hereby resigns as Registered Agent for Agree 6 aming IVC (Name of corporation)	
(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 on which this statement is filed.	
(Signature of resigning agent)	
(Signature of resigning agent)	_
If signing on behalf of an entity:	•
William A. EAST 28 (Typed or Printed Name)	
President	_
(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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