Examiner's Initials

	Office Use Only		
CORPORATION NA	AME(S) & DOCUMENT NUMB	BER(S), (if known):	
1(Corpora	tion Name) (Doc	ument #)	
2(Corpora	ition Name) (Doc	ument #)	<u>:</u>
3(Corpora	tion Name) (Doc	ument #)	
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☐ Walk in ☐	Pick up time	Certified Copy	
	Will wait Photocopy	Certificate of Status	97 I
NEW FILINGS	AMENDMENTS	returnation	97 NOV 24 NH 9: 2 SECRETARY OF SIATE TALLAHASSEE, FLORID
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Direct	or	
Limited Liability	Change of Registered Agent		製料 2
Domestication	Dissolution/Withdrawal		_
Other	Merger		- pr -
OTHER FILINGS	REGISTRATION/ QUALIFICATION	\ ~	
Annual Report Fictitious Name	Foreign	LY ~13 (7
Name Reservation	Limited Partnership	O ' O	0
	Reinstatement	'O'	
ļ	Trademark	1, ,	/ [],, ~ V

Other

· 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 Statues, the undersigned, Name of registered agent)
hereby resigns as Registered Agent for Master Craft Tool & Engage error (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.
If signing on behalf of an entity: Compared Compared Name Compared Compared Name Registered Agent Secretory (Typed or Printed Name)

Fee for filing this document:

(Capacity)

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation