## N03000003920

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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## NOV -7 PH 2:

RA Resign

11-24-14

DC

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
	Division of Corporations
SUB	JECT: The (ecra Group, Inc. (Name of Corporation)
DOC	CUMENT NUMBER: NO300003920
The e	enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
	(Name of Person)
	(Name of Person)
	THE CELTA GROUP, INC
	(Name of Firm/Company)
	10460 Roosevalt Blud
	(Address)
	St. Petersburg, Fl. 33716 (City/State and Zin Code)
r c	(englosis and sap code)
rot n	urther information concerning this matter, please call:
	Wendy Wedley at (727) 577 - 2808 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661-Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0	502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	(Name of Registered Agent)
hereby resigns as Registered Agent for	The Cecta Group, Inc.
	(Name of Corporation)
N03000003920	
(Document Number, if known)	
A copy of this resignation was mailed to the	e above listed corporation at its last known address
The agency is terminated and the office disc this statement is filed.	continued on the 31st day after the date on which
(Clevely	Plustry
(Signay)	ite of Resigning Agent)
If signing on behalf of an entity:	
(Туре	ed or Printed Name)
	₩. <b>&gt;</b>
	(Canacity) $\omega$

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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