lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : Ala REGISTERED AGENT INC.

Account Number : [120090000032]

Phone : (866)703-8828

Fax Number

: (561)202-8082

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT RESIGNATION ENDTIME HARVEST MINISTRIES OF FAITH AND DELIVERANCE,

Certificate of Status	0
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Estimated Charge	\$87.50

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Corporate Filing Menu

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APR - 5 2010



April 5, 2010

FLORIDA DEPARTMENT OF STATE

ENDTIME HARVEST MINISTRIES OF FAITH AND DELIVERANCE, INC 8300 WOODS TRAIL SEBASTIAN, FL 32976

SUBJECT: ENDTIME HARVEST MINISTRIES OF FAITE AND DELIVERANCE, INC.

REF: N08000006879

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Teresa Brown Regulatory Specialist II FAX Aud. #: H10000075841 Letter Number: 710A00008189

H100000 758413

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	07.0502(2), 617.0502(2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned, A1	A REGISTERED AGENT, INC.	
CARTINE HARVEST MINISTRIES OF FAITH AND		
hereby resigns as Registered Agent for	(Name of Corporation)	<u></u> , -
N08000006879	Deunerance, inc.	
(Document Number, if known)		
A copy of this resignation was mailed to	o the above listed corporation at its last know	vn address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date of	on which
Small	gnature of Resigning Agent)	
If signing on behalf of an entity:		2010 APR
TINA MAKI		
	Typed or Printed Name)	S PH SSEE.
PRESIDENT		
	(Cupacity)	3: 22 STATE STATE

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withdrawn corporation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

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