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2011 JAN -5 PM 4: 15 SEGRETARY OF STATE FALLAHASSEE, FLORID,

R.A. Resign.

B 1-1011

COVER LETTER

SUBJECT: MAAT Consultants, Inc (Name of Corporation) DOCUMENT NUMBER: N10000001636 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: Kevin A Sawyer (Name of Person)	
DOCUMENT NUMBER: N1000001636 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: Kevin A Sawyer	
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: Kevin A Sawyer	•
Kevin A Sawyer	
	oncerning this matter to the following:
(Name of Person)	
	son)
MAAT Consultants, Inc.	
(Name of Firm/Company)	ompany)
2645 Executive Park Drive Suite 413	te 413
(Address)	
Weston, FI 33331	
(City/State and Zip Code)	p Code)
For further information concerning this matter, please call:	this matter, please call:
Kevin A Sawyer at (954) 529-8150	at (954) 529-8150
(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of State for \$87.50 for an active corpora or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.	issolved, voluntarily dissolved or withdrawn corporation.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 60	07.0502(2), 617.0502(2), 607.1509, or 617.15	509,
Florida Statutes, the undersigned, Ma	thieu Daquin	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	MAAT Consultants, Inc.	
	(Name of Corporation)	
N1000001636		
(Document Number, if known)		
A copy of this resignation was mailed to	the above listed corporation at its last know	n address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date of	n which
If signing on behalf of an entity:	5	
(***	Typed or Printed Name)	LED LED
	(Capacity)	LORIDE TO THE CORNER OF THE CO

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