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COVER LETTER

SUBJECT: N1500	(Name of Corpo	ration)
DOCUMENT NUMBER: N1500	0011202	
The enclosed Resignation of Registered	Agent for a Corp	oration and fee are submitted for filing
Please return all correspondence concerr	ning this matter t	o the following:
Lisa Weathers		
(Name of Person)		_
Leland Management		
(Name of Firm/Compan	y)	<u> </u>
6972 Lake Gloria Blvd		
(Address)		
Orlando, FL 32809		
(City/State and Zip Cod	e)	
For further information concerning this r	natter, please cal	l:
Tanvir Hasan	407	258-4543
(Name of Person)	(Area Co) ode & Daytime Telephone Number)

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

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

RESIGNATION OF REGISTERED AGENT WOOD FOR A CORPORATION

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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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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