N9900001686

(Re	equestor's Name)	
(Ac	ddress)	
/^	ddress)	
(A)	udress)	
(Ci	ity/State/Zip/Phone #	#)
PICK-UP	☐ WAIT	MAIL
(B)	usiness Entity Name	<u>., </u>
(50	Jamess Entry Name	?)
(Do	ocument Number)	
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Certified Copies	Certificates o	of Status
		
Special Instructions to	Filing Officer:	
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Office Use Only

CFRA, LLC

REGISTERED AGENT SERVICES A SUBSIDIARY OF CARLTON FIELDS

Corporate Center Three at International Plaza 4221 W. Boy Scout Blvd, 10th Floor Tampa, Florida 33607-5736

Mailing Address:
P. O. Box 3239
Tampa, Florida 33601-3239
Tel (813) 223-7000 Fax (813) 229-4133

December 9, 2008

Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Re: RESIGNATION OF REGISTERED AGENT – TEAM ORLANDO MASTERS SWIMMING, INC.

Gentlemen:

Please find enclosed a Resignation of Registered Agent form for Team Orlando Masters Swimming, Inc. Also enclosed is Carlton Fields' Check No. 456953 in the amount of \$35.00 for the filing fee.

Very Truly Yours

Jaye F. Bentubo
Secretary

JFB/jab Enclosures

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

arsuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
lorida Statutes, the undersigned, CFRA, LLC	
(Name of Registered Agent)	
ereby resigns as Registered Agent for Team Orlando Masters Swimming, Inc.	
(Name of Corporation)	
N9900001686	
(Document Number, if known)	
copy of this resignation was mailed to the above listed corporation at its last known address.	
ne agency is terminated and the office discontinued on the 31st day after the date on which is statement is filed.	
Jagu J. Bentalo	
(Signature of Resigning Agent) Signing on behalf of an entity:	1
Joyce F. Bentubo	
(Typed or Printed Name)	
Secretary Secretary	U

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)