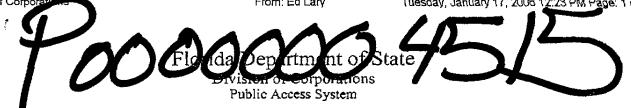
To: Division of Corpo Subject

From: Ed Lary

Tuesday, January 17, 2006 12:23 PM Page: 1 of 2



Electronic Filing Cover Sheet

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(((H060000133043)))

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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850)222-1173

Phone Fax Number

: (850)224-1640

REGISTERED AGENT RESIGNATION

INNOVATIVE REMEDIES, INC.

Cay of	OG JAN 17 AM 8: UC.
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Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the	provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.	.1509,
Florida Statutes	the undersigned,Co	orpDirect Agents, Inc.	
		(Name of Registered Agent)	
hereby resigns as Registered Agent for		Innovative Remedies, Inc.	
		(Name of Corporation)	
P000000045	15		
(Documen	t Number, if known)	·	
A copy of this re	signation was mailed to	o the above listed corporation at its last kno	wn address.
The agency is te this statement is		discontinued on the 31st day after the date	on which
	(Si	gnature of Resigning Agent)	AS 8
If signing on bel	nalf of an entity:		JAN I
	Ed Lary		ILED 17 1 ASSE
		Typed or Printed Name)	rg Z
	Assistant Secreta	ry	2:51 STATE FLORI
		(Capacity)	₹,

Fee for filing this document: S87.50 - 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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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