## P0000031441

•			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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SECRETARY OF STATE DIVISION OF CORPORATIONS

03/31/06

## **COVER LETTER**

Division of Corporations			
SUBJECT: COBBLESTONE LIMITED INC. (Name of Corporation)			
DOCUMENT NUMBER: P0000031441			
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:			
(Name of Person)			
MASTER SCCOUL FOUT PA.  (Name of Firm/Company)			
9240 SUNSET DRIVE Suite 229 (Address)			
MIAMI FL 33/73 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person) at (786) 683-4521 (Area Code & Daytime Telephone Number)			
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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			

TO: Amendment Section

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607		
Florida Statutes, the undersigned,	(Name of Registered Agent)	/AZ
hereby resigns as Registered Agent for	COBBLESTONE (Name of Corporation)	Limited INC.
	(Name of Corporation)	•
P000000 31441		
(Document Number, if known)		
A copy of this resignation was mailed to the	he above listed corporation at its las	st known address.
The agency is terminated and the office di	scontinued on the 31st day after the	date on which
this statement is filed.		
	CO)	
(Signa	ture of Resigning Agent)	— <b>%</b> ,
If signing on behalf of an entity:		OS HAR 24
(Ty <sub>l</sub>	ped or Printed Name)	3
		2 22
		RATION 2:58
	(Capacity)	<del></del>

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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