P0000057204

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
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TALLAGRASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations				-
SUBJECT: CAPITAL CONCEPT	S SERVICES, INC.			
	(Name of Corpor	ation)		772-
DOCUMENT NUMBER: P0000			·	* * - 2
The enclosed Resignation of Register	ered Agent for a Corpo	oration and fee are su	ibmitted for filing	3 .
Please return all correspondence cor	ncerning this matter to	the following:		
BRENDA HAMILTON, ESQUIR	RE	₩		· # =
(Name of Person	on)			• • • • =
(Name of Firm/Con	mpany)		"	
2 E CAMINO REAL, SUITE 202	2			
(Address)				4 7 4
BOCA RATON, FLORIDA 3343	32			
(City/State and Zip				*
For further information concerning	this matter, please call	:		
BRENDA HAMILTON	at (561_	416-8956 de & Daytime Telepho		-
(Name of Person)	(Area Co	de & Daytime Telepho	ne Number)	
Enclosed is a check made payable to or \$35.00 for an administratively dis	o the Florida Departmossolved, voluntarily di	ent of State for \$87.5 ssolved or withdrawi	0 for an active con corporation.	orporation
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporat 409 E. Gaines Street	ions	em e un	<u>.</u> -
Tallahassee, FL 32314	Tallahassee, FL 323			

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, BRENDA HAMILTON (Name of Registered Agent)	_
hereby resigns as Registered Agent for CAPITAL CONCEPTS SERVICES, INC.	_
(Name of Corporation)	
P00000057204	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known address.	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. (Signature of Resigning Agent)	-
If signing on behalf of an entity: AND DATE OF THE SERVICE OF THE	
(Typed or Printed Name) (Capacity)	

Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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