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,	
(Requestor's Name)	_
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	_
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SECRETARY OF STATE
TAIL AHASSEE, FLORID.

R.A. Lesign

OC.

COVER LETTER

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 6	517.1509,
Florida Statutes, the undersigned, Ronald L. Platt	
(Name of Registered Agent)	
hereby resigns as Registered Agent for 1031 Exchange Corp (Name of Corporation)	coration, a flor
<u>DOODOO83440</u> (Document Number, if known)	Corpo
A copy of this resignation was mailed to the above listed corporation at its last l	known address.
The agency is terminated and the office discontinued on the 31st day after the d this statement is filed.	ate on which
(Signature of Resigning Agent) RONACS L. PLATT	
If signing on behalf of an entity:	A.S
PONHEO L. PLATI REP	08 SEF
(Typed or Printed Name)	ASSET I
. (Capacity)	P SI D
	高舎 ず

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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