

Division of Corporations Public Access System

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To:

Division of Corporations

Pax Number

: (850)205-0380

From:

: FORD, JETER & BOWLUS, P.A. attn: Pat Shane Account Name

Account Number : 075350000442

Phone : (904)268-7227 Fax Number : (904)252-3337

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REGISTERED AGENT RESIGNATION

PAKEDGE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

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TEMA: JUL 2 1 2005

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: PAKEDGE, INC.			
	(Name of Corporatio	n)	
DOCUMENT NUMBER: P010	00002966		
The enclosed Resignation of Regist	cred Agent for a Corporat	ion and fee are submitted for filing.	
Please return all correspondence con	ncerning this matter to the	e following:	
Wycke Hampton, Esq.			
(Name of Pers	on)		
Ford, Bowlus, Duss, Morgan, K	enney, Safer & Hamp		
(Name of Firm/Co	mpany)		
10110 San Jose Blvd.			
(Address)			
Jacksonville, FL 32257			
(City/State and Zip	Code)		
For further information concerning t	his matter, please call:		
Wycke Hampton	at (904)	268-7227 Daytime Telephone Number)	
(Name of Person)	(Area Code &	Daytime Telephone Number)	
Enclosed is a check made payable to or \$35.00 for an administratively dis	the Florida Department osolved, voluntarily dissol	of State for \$87.50 for an active corporation ved or withdrawn corporation.	i
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399		

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.15	509,					
Florida Statutes, the undersigned, Ford, Jeter, Bowlus, Duss, Morgan, Kenney, Safer (Name of Registered Agent)						
hereby resigns as Registered Agent for Pakedge, Inc.						
(Name of Corporation)						
P01000002966						
(Document Number, if known)						
A copy of this resignation was mailed to the above listed corporation at its last known	n addre	SS.				
The agency is terminated and the office discontinued on the 31st day after the date on this statement is filed. (Signature of Resigning Agent)	ı which					
If signing on behalf of an entity:						
Wycke Hampton, Esq.						
(Typed or Printed Name)						
Vice President and Treasurer						
(Capacity)						
Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation	SECRETARY OF STATE	05 JUL 21 AN 9:4	FILED			
Make checks payable to Florida Department of State and mail to:	*	7				

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