P010003324

(Requestor's Name) (Address) (Address)	800240795378
(City/State/Zip/Phone #)	10/16/12-01016-005 **175.00
Special Instructions to Filing Officer:	FILED 12 OCT 16 PH 12:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

P01000033247

(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)

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PH 12: 53

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If signing on behalf of an entity:

C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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