P01000048876

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP . WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,
·

Office Use Only



700120828587

07/31/08--01003--003 **35.00

SECRETARY OF STATE
ALLAHASSEE, FLORIDA
ALLAHAS

2008 JUL 30 PM 2: 44

COVER LETTER

Division of Corporations
SUBJECT: HET INTERNATIONAL, INC. (Name of Corporation)
DOCUMENT NUMBER: VO1000048876
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:
Tim HALCMARK (Name of Person)
HET TOTERNATIONAL, TWC. (Name of Firm/Company)
9206 BAY Club CT. (Address)
/AMPA FC 33607 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (813) 334-5994 (Area Code & Daytime Telephone Number)
England is a check made naughle to the Floride Department of State for \$97.50 for an entire on

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED

2008 JUL 30 PM 2: 44

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509 SECRETARY OF STATE
Florida Statutes, the undersigned, The Hallmark (Name of Registered Agent) The Hallmark (Name of Registered Agent) (Name
hereby resigns as Registered Agent for HET INTERNATIONAL, TIME. (Name of Corporation)
P01000048876
(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:
(Typed or Printed Name)
î.
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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