## P01000058196

BOLD RATEN FL. 33487

CR2E031(7/97)

500004657305--6----10/29/01--01067--001 \*\*\*\*122.50 \*\*\*\*\*87.50...

\*\*\*\*122.50 \*\*\*\*\*87.50

Office Use Only

Examiner's Initials

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1		
(Corporation Name) 2.	(Document #)	OI NOV
(Corporation Name)  3.	(Document #)	SSEE. F
(Corporation Name)	(Document #)	ORIGINAL OS
(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time		☐ Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	<b>AMENDMENTS</b>	
Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS Annual Report	Amendment Resignation of R.A Change of Register Dissolution/Withdr Merger  REGISTRATION/QU Foreign	ALIFICATION
Fictitious Name	Limited Partnership Reinstatement Trademark Other	60/19 864



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 6	607.0502	(2),	617.0502(2)	), 607.1509,	or 617.1509,		
Florida Statutes, the undersigned, _GA	BRIEL	J.				2	
	(Name of registered agent)						
hereby resigns as Registered Agent for	DAVID	Ą,	GABRIEL	INTERIOR	DESIGNS,	INC.	
	(Name of corporation)						

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:

DAVID & GABRIEL INTERIOR DESIGNS, INC.

(Typed or Printed Name)

(Capacity)

OF STATE

W-2 PM 1:09

REGISTERED AGENT/DIRECTOR

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314