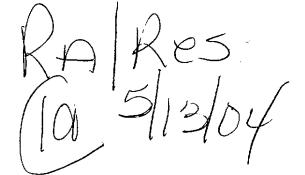
# P01000059363

(Re	equestor's Name)	
(Ad	ddress)	_
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(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	siness Entity Name)	<del></del>
(Do	ocument Number)	_
Certified Copies	Certificates of Status	
Special Instructions to I	Filing Officer:	7
, ,, <u>,</u>		

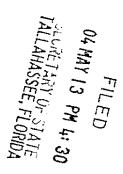






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#### TRANSMITTAL LETTER

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TRANSMITTAL LETTER
TO: Amendment Section Division of Corporations
SUBJECT: DRLANDO'S HISTORIC & SCENIC TOUR COMPANY  (Name of Corporation)  DOCUMENT NUMBER: POIDON 59363
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:
CASANDRA M. MARK (Name of Person)
DRIANDO'S HISTORIC + SCENIC TOUR CO., INC. (Name of Firm/Company)
501 N. DRLANDO AUE, STE 313-157 (Address)
WINTER PARK, FL 32789 (City/State and Zip Code)
For further information concerning this matter, please call: CORPORATION DISSOLVED
at () (Name of Person) (Area Code & Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 10, 2004

CASANDRA M. MARK ORLANDO'S HISTORIC & SCENIC TOUR COMPANY 501 N ORLANDO AVE., STE. 313-157 WINTER PARK, FL 32789

SUBJECT: ORLANDO'S HISTORIC & SCENIC TOUR COMPANY

Ref. Number: P01000059363

We have received your document for ORLANDO'S HISTORIC & SCENIC TOUR COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 904A00016150

Irene Albritton Document Specialist OF MAN 13 PAN 1: 30
FILED OF STANDA
TALLAHASSEE, FLORIDA

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, (Name of Registered Agent)
hereby resigns as Registered Agent for <u>NZLANDO'S HISTORIC &amp; SCENIC TOOR COMPA</u> (Name of Corporation)
(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:  ALCO HAY T
(Typed or Printed Name)  SET OF THE ORDER  PROPERTY OF THE ORDER  ORDER
(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