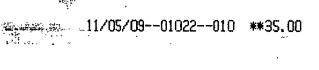
## P01000067770

(Re	equestor's Name)	<u> </u>	
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	TIAW [	MAIL	
(Business Entity Name).			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





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RA Resign.

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## **COVER LETTER**

Division of Corporations
SUBJECT: Prime Stucco, Inc.  (Name of Corporation)
DOCUMENT NUMBER: P01000067770
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:
David B. Pleat, Esq.
(Name of Person)
Pleat & Perry, P.A.
(Name of Firm/Company)
4477 Legendary Drive, Suite 202
(Address)
Destin, Florida 32541
(City/State and Zip Code)
For further information concerning this matter, please call:
David B. Pleat, Esq. at (850) 650-0599  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) i (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Post Office Box 6327 Tallahassee, FL 32314

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CR2E046(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 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,David B. F	Pleat, Esq.	
	(Name of Registered Agent)	,
hereby resigns as Registered Agent for Prime	Stucco, Inc.	
	(Name of Corporation)	,
P01000067770		
(Document Number, if known)		
A copy of this resignation was mailed to the abo	ove listed corporation at its last known a	ddress.
The agency is terminated and the office discontithis statement is filed.		hich
If signing on behalf of an entity:  (Signature of	f Resigning Agent)	AON 60
	Printed Name)  ASSEP OF S	V-5 AM 10:
(Ci	apacity)	~ <b>√</b>

## 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