P01000070842

(Re	equestor's Name)	
(Ad	ldress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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The Lewis Crow Inc.	
SUBJECT: The Lewis Crew, Inc. (Name of Corporation)	
DOCUMENT NUMBER: P01000070842	
·	
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:	1
Robert L. McLeod II, Esquire	
(Name of Person)	
The McLeod Firm	
(Name of Firm/Company)	
1200 Plantation Island Dr. S., Suite 140	
(Address)	
St. Augustine, FL 32080	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Lisa B. Taylor, Esq. at (904) 471-5007	
(Name of Person) (Area Code & Daytime Telep	1 1 1

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ıs 607.0502(2), 617.0502(2), 607.1509, or	617.1509,
Florida Statutes, the undersigned, _	Robert L. McLeod II	
	(Name of Registered Agent)	
hereby resigns as Registered Agent	for The Lewis Crew, Inc.	
• 0 0	(Name of Corporation)	
P01000070842		
(Document Number, if known)		
A copy of this resignation was maile	ed to the above listed corporation at its las	t known address.
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the	date on which
1		
	(Signature of Resigning Agent)	70.
If signing on behalf of an entity:		PIL D8 JAN 28 ECRETAR LL AHASS
ROBERT	L. Mc Leo > II	28 F ASSET
	(Typed of Timed Paine)	
		25 TAT ORII

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)