## P01000097648

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SECRETARY OF STATE.

R.A. Resignation

T BROWN JAN - 8 2003

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BOHAE PIZZA INC. (Name of Corporation)
DOCUMENT NUMBER: 701000097648
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
AUEN L. BEVER (Name of Person)
BOMAC PIZZA INC. (Name of Firm/Company)
14991 CAPE FORES TRUAIL (Address)
JACKSON VILLE, FLOWIDA 32226 (City/State and Zip Code)
For further information concerning this matter, please call:
AULA L. GEVEL at (904) 616-2085 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:  Amendment Section  Division of Corporations P.O. Box 6327  Tollabasses FI 32314  Street Address:  Amendment Section  Division of Corporations 409 E. Gaines Street  Tollabasses FI 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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.  For A CORPORATION  Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  Florida Statutes, the undersigned.  For A CORPORATION  Florida Statutes, the undersigned.
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
(Name of Registered Agent)
hereby resigns as Registered Agent for
P0100097648 (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)

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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