## P02000000450

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
(2.1	<b>,</b> ,	,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
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	cument Number)	
(20	ourself (various)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Universal Executive Services Ind (Name of Corporation)  PO202020000000000000000000000000000000
DOCUMENT NUMBER: 1 0 400000 450
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:
Allen H. Kate (Name of Person)  Allon Kate
(Name of Firm/Company)
2800 E. Commorcial Blub # 208  (Address)  Ft. LAUder Jale Fl 23308  (City/State and Zip Code)
For further information concerning this matter, please call:  Ale (Name of Person)  at (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections $00/.0502(2)$ , $01/.0502(2)$ , $00/.1509$ , or $01/.1509$ ,
Florida Statutes, the undersigned, Allen H. KAt2
(Name of Registered Agent)
hereby resigns as Registered Agent for Universal Executive Services— (Name of Corporation)
PO 200000 (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.
Cly 45th
(Sigharture of Resigning Agent)  If signing on behalf of an entity:
Allen H. (At) F. 97 F. 10 (Typed or Printed Name) STA 38
(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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