P02000008902

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COVER LETTER

	Division of Corporations
SUBJ	ECT: Storm Oil, Inc.
	(Name of Corporation)
DOC	MENT NUMBER: P02000008902
The er	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Dian	a Davis Basta, Esq.
	(Name of Person)
Davi	Basta Law Firm, P.A.
	(Name of Firm/Company)
3662	5 US 19 North
	(Address)
Palm	Harbor, FL 34684
	(City/State and Zip Code)
For fu	ther information concerning this matter, please call:
Diana	Davis Basta <u>at (727)</u> 938-2255
	(Name of Person) (Area Code & Daytime Telephone Number)

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 o	of sections 6	07.0502(2), 617.0502(2	t), 607.1509, or 6	17.1509,	
Florida Statutes, the undersi	igned, NA	THANI, FARIDA			_
		(Name of R	egistered Agent)		
hereby resigns as Registered	d Agent for	Storm Oil, Inc.			
	_	(Name of	Corporation)		
P02000008902					
(Document Number, if k	nown)	_			
A copy of this resignation w	vas mailed to	o the above listed corpo	ration at its last k	nown address	
The agency is terminated an this statement is filed.	The same	discontinued on the 31		ite on which	
If signing on behalf of an en	itity:			O7 SEI SECREI TALLAHA	
3.0111.0			· · · · · · · · · · · · · · · · · · ·	1 S\$	=
	(Typed or Printed Name)		HO F	FILE
Officer/	Vice Presid	dent/Registered Agen	ıt	F STAI	Ö
		(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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