## 200000

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247 : (305)674-3313 Phone

Fax Number : (305)674-3359

## REGISTERED AGENT RESIGNATION

DREAM COME TRUE HOUSING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	The Po
Florida Statutes, the undersigned,	PAUL SMITH (Name of registered agent)	53 29
hereby resigns as Registered Agent for _	DREAM COME TRUE HOUSING, INC. (Name of corporation)	P.
A copy of this resignation was mailed to	the above listed corporation at its last known address.	
The agency is terminated and the office of this statement is filed.	discontinued on the 31st day after the date on which	
Paul Smith	nature of resigning agent)	s (1) —
If signing on behalf of an entity:		
<u> </u>	yped or Printed Name)	يعمرني .
	(Capacity)	

Fee for filing this document: \$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

CR2E046(9/98)