

P02000040909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

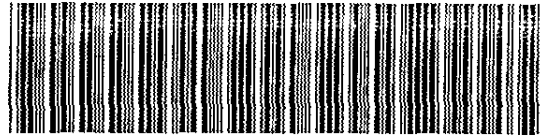
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400016785784

04/28/03--01035--025 \*\*87.50

FILED  
03 MAY -2 PM 1:40  
CLERK OF STATE  
TAMPA, FLORIDA

P02000040909  
5-2-03  
28 MAY

## **TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** W.A.M.III, Inc.

**DOCUMENT NUMBER:** P02000089272

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:

Leslie Brady-Alten, Esq.  
4150 SW Belshaw Street  
Port St Lucie, FL 34953

For further information concerning this matter, please call Leslie Brady-Alten, Esq.  
at (772) 878-5523

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned,

Leslie Brady-Alten, Esq.

hereby resigns as Registered Agent for W.A.M.III, Inc.

Document Number P02000089272

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)

**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withdrawn corporation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**

**FILED**  
03 MAY -2 PM 1:40  
CLERK OF STATE  
TALLAHASSEE, FLORIDA