## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : HODGSON RUSS LLP

Account Number: 07272C000242 Phone: (716)848-1371

Fax Number : (716)848-1371

REGISTERED AGENT RESIGNATION

S L ENTERPRISES OF SOUTH FLORIDA, INC.

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## 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, <u>HODGSON RUSS</u> (Name of Registered Agent)
nercby resigns as Registered Agent for <u>S L ENTERPRISES OF SOUTH FLORIDA. INC.</u> , (Name of Corporation)
P02000061634 (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 his statement is filed.
SECRETARY OF SI ALLAHASSEE, FLO
if signing on behalf of an entity:
David M. Stark (Typed or Printed Name)
Vice President (Capacity)
Fee for filing this document:  \$87.50 - Active corporation  \$35.00 - Administratively dissolved/volumently dissolved/

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

withdrawn corporation