P02000085641

(Re	equestor's Name)	
(Ac	ddress)	·i
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2006 AUG 24 AM 9: 48
SECRETARY OF STATE
TALL AHASSEF FI OBIDA

RA. Resign.

C. Coulliette AUG 2 8 2006

COVER LETTER

TO: Amendment Section Division of Corporations		•	
SUBJECT: MANANTIAL DADELAND, IN			
(N	ame of Corporation	<i>·</i>	
DOCUMENT NUMBER: P0200008564	1		
The enclosed Resignation of Registered Age	nt for a Corporation	on and fee are submitted for filing	g.
Please return all correspondence concerning	this matter to the	following:	
Pedro A. Martin			
(Name of Person)			
Greenberg Traurig, P.A.		,	
(Name of Firm/Company)			
1221 Brickell Avenue			
(Address)			
Miami, FL 33131			
(City/State and Zip Code)			
For further information concerning this matter	er, please call:		
Pedro A. Martin	at (305)_	579-0545	
(Name of Person)	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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	f sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the under	gned, Pedro A. Martin	
	(Name of Registered Agent)	
hereby resigns as Registere	Agent for MANANTIAL DADELAND, INC.	
, ,	(Name of Corporation)	
P02000085641	·	
(Document Number, if	nown)	
A copy of this resignation	as mailed to the above listed corporation at its last known address.	
The agency is terminated a	d the office discontinued on the 31st day after the date on which	
this statement is filed.	(Signature of Resigning Agent)	
If signing on behalf of an e	tity:	
Pedro	A. Martin	200
	A. Martin (Typed or Printed Name) ALLAHASS ACTOR AGENT	
Regist	red Agent SSERY C	
((Capacity) FLORIDA (Capacity) FLORIDA	EO

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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