## P02000093102

(Requestor's Name)	
(Address)	
(Address)	
(0) 10 1 7 10	
(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



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07/05/11--01052--019 \*\*87.50



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## **COVER LETTER**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Fursiant to the provisions of sections 607.0302(2), 617.0302(2), 607.1309, or 617.1309,
Florida Statutes, the undersigned, ISICOFF RAGATE & KOENIGS berg (Name of Registered Agent),
hereby resigns as Registered Agent for A CASI MACHINERY, Inc., (Name of Corporation)
PO2000 93102 (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 this statement is filed.
(Signature of Resigning Agent)
If signing on behalf of an entity:  Enclose The Control of Printed Name The Control of The Contr
Managing Member

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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