

P02000125148

(Requestor's Name)

(Address)

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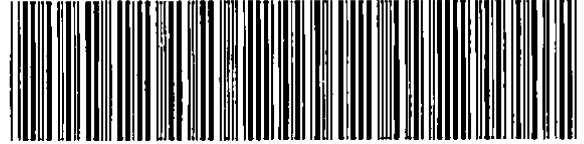
(Business Entity Name)

(Document Number)

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PLEASE FILE THE ATTACHED RESIGNATION OF REGISTERED AGENT FOR:

GLOBALCAPS, INC.

PLEASE RETURN A STAMPED COPY

CK# 8342 FOR: \$155.00 (\$35.00 for this filing)

THANK YOU!

**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, ATRIUM REGISTERED AGENTS, INC.
(Name of Registered Agent)

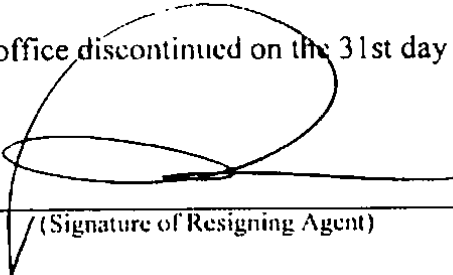
hereby resigns as Registered Agent for GLOBALCAPS, INC.
(Name of Corporation)

P02000125148

(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:

RALPH A. NARDI

(Typed or Printed Name)

VICE PRESIDENT, DIRECTOR

(Capacity)

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withdrawn corporation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