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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Southorn Truss Inv. (Name of Corporation)
DOCUMENT NUMBER: P0300005442
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:
Mavid Thomas (Name of Person)
Southern Truss Inv. (Name of Firm/Company)
3778 S.E. Pigauback Rd.
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (94/) 504 9582 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corp of \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, Florida Statutes, the undersigned, Name of Registered Agent (Name of Corporation) PO 3000605 HHD (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:

RESIGNATION OF REGISTERED

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

(Capacity)