P03000007a38

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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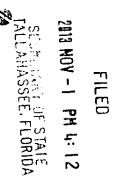
Office Use Only



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Alsignation To RA

11/01/13--01015--015 **87.50



DP [6/13

COVER LETTER

| TO: | Amendment Section Division of Corporations | |
|----------|--|----|
| SUBJ | DECT: PELICAN ASSOCIATES II, INC. | |
| | (Name of Corporation) | |
| DOC | UMENT NUMBER: P03000007238 | |
| The er | nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing | g. |
| Please | e return all correspondence concerning this matter to the following: | |
| Jeffı | rey Drew Butt | |
| | (Name of Person) | |
| Squ | iire Sanders (US) LLP | |
| <u> </u> | (Name of Firm/Company) | |
| 201 | North Franklin Street, Suite 2100 | |
| | (Address) | |
| Tan | npa, Florida 33602 | |
| | (City/State and Zip Code) | |
| For fu | orther information concerning this matter, please call: | |
| Jeff | (Name of Person) at (813) 202-1300 (Area Code & Daytime Telephone Number) | |
| | (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED

RESIGNATION OF REGISTERED AGENT, NOV -1 PM 4: 12 FOR A CORPORATION

SECREBURY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.15 or 617.1509, Florida Statutes, the undersigned, ANDREW SERVICE CORPORATION OF FLORIDA (Name of Registered Agent) hereby resigns as Registered Agent for PELICAN ASSOCIATES II, INC. (Name of Corporation) P03000007238 (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. If signing on behalf of an entity: Jeffrey Drew Butt (Typed or Printed Name)

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