P03000034715

(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:		
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		

Office Use Only



800037605788

45. 15. 04 --01001 --000 ++585.00

2004 JUN 14 PM 4: 35 04 JUN 14 PM 4: 36
TALLAHASSEE, FLORIDARIVISION SELVINGING SERVINGING SERVINGI

KA. Resign

C. Coulliste JUN 1 5 2004

mander - man 3 feb. 1。 1.15 For A. Man The Common State St	करण विकास प्रकार के प्रकार के लिए हैं। जिस के क्षेत्रक के बीच े किया के क्षेत्रक की किया के किया के किया के किय स्थापन
CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
Shamrock Siding Inc.	
	Art of Inc. File
	LTD Partnership File Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation_
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
ignature	Fictitious Owner Search
	Vehicle Search
	Driving Record

UCC 1 or 3 File_ UCC 11 Search_

UCC 11 Retrieval

Courier

Requested by: / W (

Will Pick Up

Name

Walk-In

FLORIDA DEPARTMENT OF STATE, SANDRA B. MORTHAM, SECRETARY OF STATE

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2)), 607.1509, or 617.1509,
Florida Statues, the undersigned, Capital Connection, I	
hereby resigns as Registered Agent for Shampeck (Name of cor	poration)
A copy of this resignation was mailed to the above listed corpora	tion at its last known address.
The agency is terminated and the office discontinued on the 31s	t day after the date on which
this statement is filed. (Signature of resigning agent)	·
If signing on behalf of an entity:	PIL 2004 JUN [4 TALLAHASSEE
Weimar Lopez	SSX T
(Typed or Printed Name)	FILED 14 PM Krops SEEFFL
Registered Agent Coordinator	ORIA :
(Capacity)	D 35

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation