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G. Coulliette FEB 1 0 1986

Greenberg Traurig, P.A.		
Requester's Name		
Address		
City/State/Zip Phone #		
Please call June at 222-6891 whe	n ready.	
Thank you!		·
CORPORATION NAME(S) & DOCUM		Office Use Only
COM ORATION NAME(3) & DOCUM	ient nomber(5), (ii k	nown <i>y</i> :
1. Sanwood Flor (Corporation Name)	ida, Inc.	
(Corporation Name)	(Document #)	
2. (Corporation Name)	(Document #)	
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3. (Corporation Name)	(Document #)	
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		Examiner's Initials

CR2E031(7/97)



February 13, 2006

GREENBERG TRAURIG

TALLAHASSEE, FL

SUBJECT: SANWOOD FLORIDA, INC.

Ref. Number: P03000051361

We have received your document for SANWOOD FLORIDA, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Resigning agent must sign.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 506A00010228

RECEIVED

OF MAR -1 PH 3: 12

OWNER -1 PH 3: 12

COVER LETTER

(Name of Corporation) DOCUMENT NUMBER: P03000051361 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: PEDRO A. MARTIN (Name of Person) GREENBERG TRAURIG, PA (Name of Firm/Company) 1221 BRICKELL AVENUE (Address) MIAMI, FL 33131 (City/State and Zip Code) For further information concerning this matter, please call: PEDRO A. MARTIN at (305) 579-0545	TO: Amendment Section Division of Corporations	
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: PEDRO A. MARTIN (Name of Person) GREENBERG TRAURIG, PA (Name of Firm/Company) 1221 BRICKELL AVENUE (Address) MIAMI, FL 33131 (City/State and Zip Code) For further information concerning this matter, please call: PEDRO A. MARTIN at (305) 579-0545	SUBJECT: SANWOOD FLORIDA, INC. (Name of Corporation)	
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PEDRO A. MARTIN at (305) 579-0545	(City/State and Zip Code)	
	For further information concerning this matter, please call:	
(Name of Person) (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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ns 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, _	PEDRO A. MARTIN
	(Name of Registered Agent)
hereby resigns as Registered Agent	for SANWOOD FLORIDA, INC.
	(Name of Corporation)
P03000051361	
(Document Number, if known)	
A copy of this resignation was maile	ed to the above listed corporation at its last known address.
The agency is terminated and the of this statement is filed.	Glangitge of Resigning Agent)
	(digitative of Resigning Agent)
If signing on behalf of an entity:	三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三
PEDRO A. MA	ARTIN ARTIN
	(Typed or Printed Name)
REGISTERED	AGENT 23
	(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