

P03000059513

(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:

Office Use Only



200121672252

04/04/08--01038--021 **87.50

FILED

2008 APR -4 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Resignation

TB

4-9-08

Lowndes
Drosdick
Doster &
Kantor
Reed, P.A.

A T T O R N E Y S
A T L A W

ANNE C. FISHER
PARALEGAL
DIRECT DIAL: 407-418-6251
SOUTH ORANGE AVENUE OFFICE
POST OFFICE BOX 2809
ORLANDO, FLORIDA 32802-2809
anne.fisher@lowndes-law.com

 MERITAS LAW FIRMS WORLDWIDE

April 2, 2008

VIA FEDEX

Florida Department of State
Division of Corporations
Attention: Corporate Filings
2661 Executive Center Circle
Tallahassee FL 32301

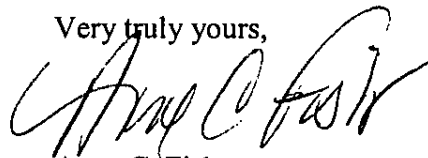
Re: Resignation of Registered Agent, Crescendo Management, Inc.

Dear Sir:

Enclosed please find a Resignation of Registered Agent (the "Resignation") for Crescendo Management, Inc. ("Crescendo"), together with this law firm's check in the amount of \$87.50. Please file this Resignation in the corporate records for the State of Florida, and please indicate that Gary Soles, Esq., has resigned as the Registered Agent of Crescendo.

Thank you for your assistance regarding this matter.

Very truly yours,



Anne C. Fisher
Paralegal to Gary Soles

Acf
Encl.

c: Heidi Han, (via u.s. mail, w/encl.)
Gary Soles, Esq. (w/o encl.)

0051105\100497\992232\2

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Crescendo Management, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P03000059513

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:

Gary Soles

(Name of Person)

Lowndes, Drosdick, Doster, Kantor and Reed, P.A.

(Name of Firm/Company)

P.O. Box 2809

(Address)

Orlando FL 32802

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary Soles

(Name of Person)

at (407) 418-6331

(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 sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, GARY SOLES

(Name of Registered Agent)

hereby resigns as Registered Agent for CRESCENDO MANAGEMENT, INC.

(Name of Corporation)

P03000059513

(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:

GARY SOLES

(Typed or Printed Name)

ATTORNEY

(Capacity)

FILED
2008 APR -4 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**