(Re	equestor's Name)				
(Ac	ddress)				
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PICK-UP	☐ WAIT ☐ MAIL				
(Bi	usiness Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
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COVER LETTER

	rision of Corporations					
SUBJECT	Dockside Marina Club, Inc	· ·		. ,		
	•	(Name o	f Corpor	ation	1)	
DOCUME	NT NUMBER: P03000098	331				
The enclos	ed Resignation of Registered A	gent for	a Corpo	orati	on and fee are submitte	d for filing
Please retu	rn all correspondence concernin	g this n	natter to	the	following:	
Theodor	e M. Burt					
	(Name of Person)		·			
Theodor	e M. Burt, P.A.					
	(Name of Firm/Company)			_		
Post Offi	ce Box 308					,
	(Address)					
Trenton,	Florida 32693					
·····	(City/State and Zip Code)	:			•	
For further	information concerning this ma	tter, ple	ase call	:		
Susan Th	norsen	at (352)	463-2378	
	(Name of Person)		Area Co	đe &	463-2378 Daytime Telephone Nun	nber)

n or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, Theodore M. Burt, Esq (Name of Registered Agent)
hereby resigns as Registered Agent for Dockside Marina Club, Inc. (Name of Registered Agent) (Name of Corporation)
P03000098331
(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:
Theodore M. Burt (Typed or Printed Name) Theodore M. Burt THE PROPERTY OF T
(Capacity)
(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withdrawn corporation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