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(Re	questor's Name)	, <u>, , , , , , , , , , , , , , , , , , </u>
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COVER LETTER

Division of Corporations SUBJECT: RESIGNATION REGISTERED AGENT STEVE PATE CONSTRUCTION INC. (Name of Corporation) DOCUMENT NUMBER: P03000120972 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: SCOTT B SANDFORT CPA (Name of Person) BASS & SANDFORT ACCOUNTANTS PA (Name of Firm/Company) 1301 W GARDEN ST (Address) PENSACOLA FL 32501 (City/State and Zip Code) For further information concerning this matter, please call: SCOTT B SANDFORT CPA (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	s 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, _	SCOTT SANDFORT
	(Name of Registered Agent)
hereby resigns as Registered Agent f	or STEVE PATE CONSTRUCTION, INC.
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)
P03000120972	
(Document Number, if known)	,
A copy of this resignation was maile	d to the above listed corporation at its last known address.
The agency is terminated and the off this statement is filed.	ice discontinued on the 31st day after the date on which
	1/6/07
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
J C	
	(Typed or Printed Name)
	W.
	io Division in the second seco
	Compaign)
	(Capacity)
	9 02/15
	2 (15)
	(Capacity) ling this document: Active corporation
	The state of the s
\$35.00 - 2	Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation