## P03000121035

| (Requestor's Name)                      |               |  |
|---|---------------|--|
| (Address)                               |               |  |
| (Address)                               |               |  |
| (City/State/Zip/Phone #)                |               |  |
| PICK-UP WAIT MAIL                       | •             |  |
| (Business Entity Name)                  | <del></del> - |  |
| (Document Number)                       |               |  |
| Certified Copies Certificates of Status | <del></del>   |  |
| Special Instructions to Filing Officer: |               |  |
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SECRETARY OF STATE
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## **COVER LETTER**

| Division of Corporat          | tions  |
|-------------------------------|--|
| SUBJECT:                      | IRAJ S. SHOJAIE, ARCHITECT, P.A.                                   |
|                               | (Name of Corporation)  |
| DOCUMENT NUMBER:_             | P03000121035   |
| The enclosed Resignation of   | Registered Agent for a Corporation and fee are submitted for filin |
| Please return all corresponde | ence concerning this matter to the following:                      |
| IRAJ S                        | S. SHOJAIE   |
| (Name                         | e of Person)   |
| IRAJ S. SHOJ                  | JAIE, ARCHITECT  |
| (Name of I                    | Firm/Company)  |
| 6535 NOVA D                   | DRIVE, SUITE 105   |
| (A                            | ddress)  |
| DAVIE, FLO                    | ORIDA 33317  |
| (City/State                   | and Zip Code)  |
| For further information conc  | cerning this matter, please call:                                  |
| Iraj S. Sho                   | jaie <sub>at (</sub> 954 <sub>)</sub> 370-6300                     |
| (Name of Pers                 |  |

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO:

**Amendment Section** 



February 27, 2007

IRAJ S. SHOJAIE 6535 NOVA DRIVE SUITE 105 DAVIE, FL 33317

SUBJECT: IRAJ S. SHOJAIE ARCHITECT P.A.

Ref. Number: P03000121035

We have received your document for IRAJ S. SHOJAIE ARCHITECT P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

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) 245-6916.

Carol Mustain Document Specialist

Letter Number: 407A00014078

## **RESIGNATION OF REGISTERED AGENT** FOR A CORPORATION

| Pursuant to the provisions of sections 60                           | 7.0502(2), 617.0502(2), 607.1509, or 617.1509,   |
|---|--|
| Florida Statutes, the undersigned,                                  | Iraj S. Shojaie  |
| hereby resigns as Registered Agent for _                            | (Name of Registered Agent)  IRAJ S. SHOJAIE, ARCHITECT P.A.  (Name of Corporation)   |
| P03000121035  | ,  |
| (Document Number, if known)   | _  |
| The agency is terminated and the office of this statement is filed. | the above listed corporation at its last known address.  liscontinued on the 31st day after the date on which R SEE, FLOR SEE, |
| If signing on behalf of an entity:                                  |  |
| (T)   | J SHOJAIE  yped or Printed Name)  SIDENT  (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