

(Requestor's Name) (Address)	600094512736		
(Address) (City/State/Zip/Phone #)	-		
PICK-UP WAIT MAIL	_		
(Business Entity Name) (Document Number)	- ·	03/26/0701032015 **35.0	0
Certified Copies Certificates of Status	_	O71 SECTALLA	
Special Instructions to Filing Officer:		MAR 26 PH 2: 4.1 CRETARY OF STATE AHASSEE, FLORIDA	Registration was
Office Use Only]		

COVER LETTER

10:	Amendment Section Division of Corporations	
SUBJ	ECT: AMITELO COMMUNICATIONS, INC.	
	(Name of Corpo	ration)
DOC	UMENT NUMBER: P03000129709	
The er	nclosed Resignation of Registered Agent for a Corp	oration and fee are submitted for filing
Please	return all correspondence concerning this matter to	the following:
Jaso	on Wong	
	(Name of Person)	
	(Name of Firm/Company)	
18-5	70 hood road	
	(Address)	
Mark	kham, Ontario, L3R 4G7, Canada	
	(City/State and Zip Code)	<u> </u>
For fu	rther information concerning this matter, please cal	:
Jasoi	n Wong at (416_	de & Daytime Telephone Number)
	(Name of Person) (Area Co	de & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 6	607.0502(2), 617.0502(2), 607.1509, or 617	'.1 <mark>5</mark> 09,	,	
Florida Statutes, the undersigned,W	ong, Jason			
· · · · · · · · · · · · · · · · · · ·	(Name of Registered Agent)			_
hereby resigns as Registered Agent for	AMITELO COMMUNICATIONS, INC.	•		
,BB	(Name of Corporation)			_,
P03000129709				
(Document Number, if known)				
A copy of this resignation was mailed to	o the above listed corporation at its last kno	own ad	ldress	١.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date	on wh	nich	
If signing on behalf of an entity:	grature of Resigning Agent) Typed or Printed Name)	SECKETARY OF S	07 MAR 26 PM	
		STATE LORIDA	2:41	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)