## P03030

(Requestor's Name)
(Address)
(Address)
,
(O) (O) (-17) (D) (
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Clauds
Special Instructions to Filing Officer:

Office Use Only



000186638720

10/26/10--01040--010 \*\*175.00

SECRETARY OF STATE OF STATE OF CORPORATIONS

RA: Resign C.COULLIETTE OCT 2 7 2010

**EXAMINER** 



111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

October 18, 2010

RE: MEDIQ EQUIPMENT & MAINTENANCE SERVICES, INC. (DE. DOM.)
NETTOUCH COMMUNICATIONS, INC. (TX. DOM.)
NUCLEAR SUPPORT SERVICES, INC. (VA. DOM.)
SPIRIT RENT-A-CAR, INC. (OH. DOM.)
STRUCTURAL SYSTEMS TECHNOLOGY, INC. (VA. DOM.)

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is \_\_\_\_ check in the amount of \$175.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM		
i fortua statutes, the undersigned,	(Name of Registered Agent)	•	
hereby resigns as Registered Agent for	NUCLEAR SUPPORT SERVICES, INC. (VA. DOM.)	•	
nereby resigns as Registered Agent for	(Name of Corporation)	_,	
P03030			
(Document Number, if known)	<del>_</del>		
A copy of this resignation was mailed to	o the above listed corporation at its last known address.	•	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which		
_ /An	all		
(Si	gnature of Rosigning Agent)		
If signing on behalf of an entity:			
C T COPPOR A 1	TION SYSTEM - THERESA ALFIERI		
	Typed or Printed Name)	10	SS
	Typed of Trined Name)	001	02.5
AS	SISTANT SECRETARY	10 OCT 26	OF AND
	(Capacity)	PH 2:	356
		$\ddot{\sim}$	37. 7.80
		<b>1</b> 7	TA TA

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withdrawn corporation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