P04000041698

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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12/28/06--01003--009 **87.50

COVER LETTER

	Division of Corporations	
	SUBJECT: Jerry Ellison Inc (Name of Corporation)	
•	DOCUMENT NUMBER: P04000041698	
	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:	
	Jerry Ellson (Name of Person)	
(,	(1120 HW 49 St) Jerry Ellson Inc	
Ϋ́	Pompano Bch PL 33064	
	(City/State and Zip Code)	
	For further information concerning this matter, please call:	
	Jerry Ellison at 954, 659.9723	
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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



December 21, 2006

JERRY ELLISON JERRY ELLISON, INC. 1120 NW 49 ST POMPANO BEACH, FL 33064

SUBJECT: JERRY ELLISON, INC. Ref. Number: P04000041698

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Letter Number: 806A00072122

Thelma Lewis
Document Specialist Supervisor

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

FILED
2006 DEC 28 PM 1: 23
TALLAHASSEE, FISTATE

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Tow Muleh (Name of Registered Agent)
hereby resigns as Registered Agent for Jerry Ellson hc. (Name of Corporation)
P04000041698
(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:
(Typed or Printed Name)
(Canacity)

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