## P04000043471

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

Office Use Only



600041487676

10/07/09 -01004--004 \*\*87.50

11 -8 A 8: 16



## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: All About Collular Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P040000 43471</u>
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:
Dorice Moore (Name of Person)
All About Cellular, Inc. (Name of Firm/Company)
1103 N. Wheeler St.
Plant City FL 33563 (City/State and Zip Code)
For further information concerning this matter, please call:
Dorice Moore at (813) 152-7997 (Name of Person) at (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,		
Florida Statutes, the undersigned, <u>henneth</u> <u>Distivo</u> (Name of Registered Agent)			
hereby resigns as Registered Agent for All About Cellular, (Name of Corporation)	Ir	<u>1C</u> ,	
PO4000043471 (Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last known	wn addr	ess.	
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.    Weight Co. Signature of Resigning Agent)	on whic	h	
If signing on behalf of an entity:			
(Typed or Printed Name)		O4 007-8 AM	
(Canacity)	33	ά	J

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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