Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From: Rosa Wong, Paralegal

: AKERMAN SENTERFITT (MIAMI) Account Name

Account Number : 075471001363

: (305)374-5600

Fax Number

: (305)374-5095

REGISTERED AGENT RESIGNATION

ADONAL DROP OF LIFE, INC.

Certificate of Status Certified Copy 1 Page Count 01 \$87.50 Estimated Charge

Elm: 559081

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Corporate Filing Menu

9/30/2009

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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, JE	EAN L. RENELIEN	_	
-	(Name of Registered Agent)		
hereby resigns as Registered Agent for	ADONAI DROP OF LIFE, INC.		
	(Name of Corporation)	_9	
P04000050614	,		
(Document Number, if known)			
A copy of this resignation was mailed t	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	š	
	menelien PS	· 09:SEP	
Jean L. Renelien	gnature of Resigning Agent)	봈	
If signing on behalf of an entity:	ASS	ယ္ဆ	F
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	E. T.	PH	Ö
	(Typed or Printed Name)		
	. See See See See See See See See See Se	ည္	
	(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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