P04000051336

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SECH FARY OF CLAFF DIVISION OF CORPORATIONS

01/2-15

COVER LETTER

	nent Section 1 of Corporations			
SUBJECT: La	aw Offices of I	Edward L.	Artau, P.A.	
	NUMBER: P0400005	(Name of Corporat		
	esignation of Registered A		ation and fee are submitted	l for filing
Please return al	I correspondence concerni	ing this matter to t	he following:	
Edward	L. Artau			
	(Name of Person)		_	
Law Offic	es of Edward L.	Artau, P.A.		
	(Name of Firm/Company	7)	-	
	(Address)		-	
- 10-	(City/State and Zip Code	·)	-	
For further info	rmation concerning this m	atter, please call:		
Edward	L. Artau	at (561	3670643	
	(Name of Person)	(Area Code	& Daytime Telephone Num	per)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 15 JAN -5 PM 12: 31 FOR A CORPORATION

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. Cawal L. May (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
hereby resigns as Registered Agent for Law Offices of Edward L. Artau, P.A. (Name of Corporation) P0400051336 (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. Charlet Agenty (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	Florida Statutes, the undersigned Edward L. Artau
(Capacity) P0400051336 (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. Characteristic of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	(Name of Registered Agent)
(Capacity) P0400051336 (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. Characteristic of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	hereby resigns as Registered Agent for Law Offices of Edward L. Artau, P.A.
(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. Lateral Lateral (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	(Name of Corporation)
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. Lawrange Lawrange Lawrange (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	P0400051336
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. Cawal L. May (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	(Document Number, if known)
Calward L. Autus (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	A copy of this resignation was mailed to the above listed corporation at its last known address.
(Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
(Typed or Printed Name) (Capacity) Fee for filing this document: \$87.50 - Active Corporation	Cdward L. Artau
(Capacity) Fee for filing this document: \$87.50 - Active Corporation	(Signature of Resigning Agent)
(Capacity) Fee for filing this document: \$87.50 - Active Corporation	If signing on behalf of an entity:
(Capacity) Fee for filing this document: \$87.50 - Active Corporation	
(Capacity) Fee for filing this document: \$87.50 - Active Corporation	
Fee for filing this document: \$87.50 - Active Corporation	(Typed or Printed Name)
Fee for filing this document: \$87.50 - Active Corporation	
Fee for filing this document: \$87.50 - Active Corporation	
\$87.50 - Active Corporation	(Capacity)
\$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