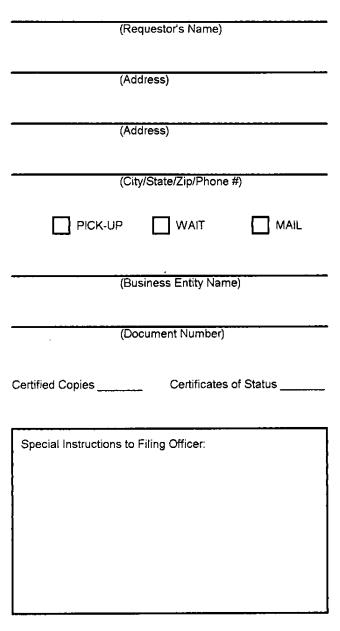
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FILEO SECRETARY OF STATE DIVISION OF CORPORATION

JUN 2 5 2013

T. BROWN

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJE	ECT: The Credit Voice, I	nc.		
	(Nan	ne of Corporation	on)	
DOCU	MENT NUMBER: P04000090563	3		
The en	closed Resignation of Registered Agent	for a Corpora	tion and fee are submitted for f	iling.
Please	return all correspondence concerning th	is matter to th	e following:	
J. N	Marshall Fry, Esq. (Name of Person)	1		
	(Name of Person)			
	(Name of Firm/Company)	<u> </u>		
905	6 E MLK Dr., #228			
	(Address)			
Tar	pon Springs, FL 3468 (City/State and Zip Code)	9		
For fur	rther information concerning this matter,	, please call:		
J. N	Marshall Fry	727	939-0003 & Daytime Telephone Number)	
	(Name of Person)	(Area Code	& Daytime Telephone Number)	
171	and in a short words wought ato the Florie	ia Domontuson	t of State for \$87.50 for an acti	VA CO

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 FOR A CORPORATION

Fursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
lorida Statutes, the undersigned, J. Marshall Fry
(Name of Registered Agent)
ereby resigns as Registered Agent for The Credit Voice, Inc.
(Name of Corporation)
P04000090563
(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
his statement is filed.
1/bulo (1)
(Signature of Resigning Agent)
f signing on behalf of an entity:
(Typed or Printed Name)
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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