P04000097699

(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:





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SECRETAIN OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2008

Ken Andrews 8463 Butler Dr. Windermere, FL 34786

SUBJECT: SOUTHERN TITLE AGENCY, INC.

Ref. Number: P04000097699

Upon receipt of your check for \$120.50 only cover letters were received, but no documents were included. Enclosed are forms to resign as registered agent and officer/director. A total of 122.50 should be returned. The fee to file the resignation as registered agent is \$87.50 and the fee to resign as officer/director is \$35.

A letter giving this information was originally sent to the Orlando address as requrested, but it was returned in the mail as undeliverable.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Letter Number: 507A00071483

Susan Payne Senior Section Administrator

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

SUBJECT: Southown Title Agency Lice (Name of Corporation)
DOCUMENT NUMBER: POY 000997699
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:
(Name of Person)
Soffer it Agency, In (Name of Firm/Company)
7680 Universac Blun 5-300
Orcano, F(32-835 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (YO) 719-3218 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corpora or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 730.50
JEORETARY OF STATE ALLAHASSEE. FLORIDA
CB2F046(08/05)

CR2E046(08/05)

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, KEN ANDITOUS (Name of Registered Agent)	_
hereby resigns as Registered Agent for South Stutiff Agency (Name of Corporation)	1,TM
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known addr	ess.
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)	h
If signing on behalf of an entity:	
	≥
(Typed or Printed Name)	FILE
(Capacity)	æ □ æ

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