P0502	0009493
(Requestor's Name) (Address)	300118609283
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) (Document Number) Certified Copies Certificates of Status	02/22/0801041006 **87.50 08 FEB 22 AM 1: 28
Office Use Only	RA RES Ma 2/24/08

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

ASON Tavestimenty LA (Name of Corporation) SUBJECT: 105000009493 **DOCUMENT NUMBER:** 

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:

Dorth: + (Name of Person)

(Name of Firm/Company)

NE 124th Street 29

(City/State and Zip Code) som

For further information concerning this matter, please call:

at (305) 893-0110 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, M	(Name of Registered Ageni)
hereby resigns as Registered Agent for	Cason Investments, Irc., (Name of Corporation)
POSO0009493 (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.

Mori

(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

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation 08 FEB 22 AMII: 28

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314