P05000021215

(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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2009 DEC 17 PHI2: 26

R.A. Resign.

TB

DEC 18 2009

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: ROCK SOLID COUNTER TOPS, INC	
(Name of Corporation)	
DOCUMENT NUMBER: P05000021215	
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:	
YUDERCA BARBERA	
(Name of Person)	
ACCOUNTING PLUS MORE	
(Name of Firm/Company)	
4100 CORPORATE SQ SUITE 150	
(Address) NAPLES, FL 34104	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
YUDY BARBERA at () 643-9968	
(Name of Person) (Area Code & Daytime Telep	hone 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, ACCOUNTING PLUS MORE
(Name of Registered Agent)
hereby resigns as Registered Agent for ROCK SOLID COUNTER TOPS INC
(Name of Corporation)
P05000021215
(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.
Judual 1018
(Signature of Resigning Agent)
If signing on behalf of an entity:
YUDERCA BARBERA (Typed or Printed Name) TO THE TOTAL TOTAL TO THE TOTAL
(Typed or Printed Name)
PRESIDENT 26
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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