

P05000050604

(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:

Office Use Only



600162287306

10/29/09--01017--015 \*\*35.00

FILED

2009 OCT 29 PM 4:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. Resign.

TB OCT 29 2009

**CFRA, LLC**  
**REGISTERED AGENT SERVICES**  
**A SUBSIDIARY OF CARLTON FIELDS**

Corporate Center Three at International Plaza  
4221 W. Boy Scout Blvd, 10<sup>th</sup> Floor  
Tampa, Florida 33607-5736

Mailing Address:  
P. O. Box 3239  
Tampa, Florida 33601-3239  
Tel (813) 223-7000 Fax (813) 229-4133

October 27, 2009

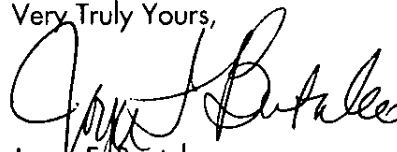
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

**Re: RESIGNATION OF REGISTERED AGENT – CLAIREMAT REAL PROPERTY INVESTMENTS, INC.**

Gentlemen:

Please find enclosed a Resignation of Registered Agent form for Clairemat Real Property Investments, Inc. Also enclosed is Carlton Fields' Check No. 476234 in the amount of \$35.00 for the filing fee.

Very Truly Yours,



Joyce F. Bentubo  
Secretary

JFB/jab  
Enclosures

**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, CFRA, LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for CLAIREMAT REAL PROPERTY

(Name of Corporation)

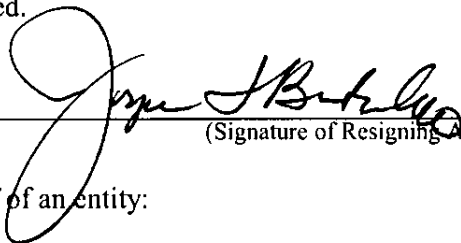
**INVESTMENTS, INC.**

P05000050604

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Joyce F. Bentubo

(Typed or Printed Name)

Secretary

(Capacity)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 OCT 29 PM 4:13

FILED

**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