P05000107483

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TO:	Amendment Section Division of Corporations		
SUBJI	_{ECT:} Verbal Judo Institut	e Inc.	
DOCL	Name 105000107483 <mark>PMENT NUMBER:</mark>	of Corpora	ition)
	closed Resignation of Registered Agent for		ration and fee are submitted for filing.
Please	return all correspondence concerning this	matter to	the following:
Par	nela Thompson		
	(Name of Person)		_
Ver	bal Judo Institute, Inc.		
	(Name of Firm/Company)		_
256	9 Sloan Rd.		
	(Address)		
Aub	ourn, NY 13021		
	(City/State and Zip Code)		
For fur	ther information concerning this matter, p	lease call:	
Pan	mela Thompson (Name of Person) at	954	,551-7947
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)

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. John A. Laudadio CPA		
(Name of Registered Agent)	-	
hereby resigns as Registered Agent for Verbal Judo Institute, Inc.		
(Name of Corporation)	_	
PO5000107483		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last known address	i.	
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:		
(Typed or Printed Name)	11	35. 35
	JUL 29	
(Capacity)		
Fee for filing this document	FE 404 PM	Maritalia

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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