## P05000143116

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SECRETARY OF CORPORATIONS
OF JUL 17 PM 3: 33

RA Resign.
07/25/06

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Always Foxy Entertain	nment, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: P0500	0143116
The enclosed Resignation of Registe	ered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
Donna L. Draves, Esq.	
(Name of Perso	on)
The Draves Law Firm, P.A.	
(Name of Firm/Cor	npany)
120 East Concord Street	
(Address)	<del></del>
Orlando, Florida 32801	
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
Donna L. Draves, Esq.	at (407) 423-1183 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively dis	o the Florida Department of State for \$87.50 for an active corporation ssolved, voluntarily dissolved or withdrawn corporation.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

Burguent to the provisions of continue (07.0500(2), (17.0500(2), (07.1500, (17.16	<b>500</b>	
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.15	109,	
Florida Statutes, the undersigned, Donna L. Draves, Esq.  (Name of Registered Agent)	<del></del>	
hereby resigns as Registered Agent for Always Foxy Entertainment, Inc.		<del>,</del> ,
(Name of Corporation)		
P05000143116		
(Document Number, if known)	* : **	-
A copy of this resignation was mailed to the above listed corporation at its last known	n address.	
The agency is terminated and the office discontinued on the 31st day after the date or this statement is filed.	which	
(Signature of Resigning Agent)		
If signing on behalf of an entity:	JF 90	SECR 01VISION
(Typed or Printed Name)	JL 17 PM 3:33	ETARY OF V OF CORP
(Capacity)	9: 33	STATE ORATIONS
Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation	(	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