## P05000163562

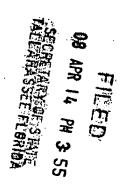
(Re	questor's Name)	<del></del>
(Ad	dress)	
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PICK-UP	<b>W</b> ÄIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Beach One Development Company Incorporated
(Name of Corporation)
DOCUMENT NUMBER: #P05000163562
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:
Charles C. Miller III
(Name of Person)
Beach One Development Company Incorporated
(Name of Firm/Company)
Post Office Box 7597
(Address)
Panama City Beach, Florida 32413
(City/State and Zip Code)
For further information concerning this matter, please call:
Rochelle Hobgood at ( 850 ) 235-9084
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 of	07.0302(2), 017.0302(2), 007.1309, 00017.1309,	
Florida Statutes, the undersigned, Ch	narles C. Miller III	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Beach One Development Company Incorporate	ec .
	(Name of Corporation)	
#P05000163562		
(Document Number, if known)	_	
A copy of this resignation was mailed to	o the above listed corporation at its last known addres	SS.
this statement is filed.	discontinued on the 31st day after the date on which	<b>.</b>
– (Si	gnature of Resigning Agent)	<b>&gt;</b>
If signing on behalf of an entity:		* T
_Charles	Typed or Printed Name)	\$ ₩ ₩
$\mathcal{D}_{\!\scriptscriptstyle{\mathcal{N}}}$	rsident	55

## 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

(Capacity)