CTCOVI	poration System			
Theresa	poration System Altieri questor's Name			
Req	uestor's Name			
1633 Broadway Address New York, NY 10019 City/State/Zip Phone #		8000028365189 -04/12/9901112017 *****105.00 ******35.00		
City/State/2	Zip Phone # 264-5270	Office Use Only		
	NAME(S) & DOCUMENT NUM	IBER(S), (if known):		
	oration Name) (Do	ocument #)		
(Corpo	oration Name) (De	ocument #)		
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Walk in Mail out	Pick up time Will wait Photocopy	Certified Copy		
Walk in Mail out NEW FILINGS	Pick up time	Certified Copy		
Walk in Mail out NEW FILINGS	Pick up time Will wait Photocopy	Certified Copy Certificate of Status		
Walk in Mail out NEW FILINGS	Pick up time Will wait Photocopy AMENDMENTS	Certified Copy Certificate of Status ALC Cotor		
Walk in Mail out NEW FILINGS Profit	Pick up time Will wait Photocopy AMENDMENTS Amendment	Certified Copy Certificate of Status ALLAN Color ALLAN		
Walk in Mail out NEW FILINGS Profit NonProfit	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire	Certified Copy Certificate of Status SECRETARY ALLAHASSE		
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire Change of Registered Agent	Certified Copy Certificate of Status SECRETARY ALLAHASSE		
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire Change of Registered Agent Dissolution/Withdrawal	Certified Copy Certificate of Status ALC Cotor		
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/	Certified Copy Certificate of Status SECRETARY ALLAHASSE		
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION	Certified Copy Certificate of Status SECRETARY ALLAHASSE		
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign	Certified Copy Certificate of Status SECRETARY ALLAHASSE		
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dire Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign Limited Partnership	Certified Copy Certificate of Status SECRETARY ALLAHASSE		

CR2E031(1/95)

Examiner's Initials

TLL



Florida Department of State, Jim Smith, Secretary of State

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SECRETARY OF STATE
SECRETARY OF STATE

RESIGNATION OF REGISTERED AGENT

Pursuant to th	e provisions of sections 607.09	502(2) or 607.	1509, Florida Statu	ues, the
undersianed.	C T CORPORATION SYSTEM	<u>-</u>	hereby resigns a	S
	(name of registered aggent for PROPERTY ADMINIS	pent) TRATORS, IN	CORPORATED d/	ъ/а
_	PROPERTY ADMIN	of corporation) ISTRATORS	INCSOUTH	
	resignation was mailed to the			st known
address.	307 Waters Edge Hilton Head, SC. 29928 Attn: Donald F. Christ			
	s terminated and the office disc	continued on the	ne 31st day after ti	ne date on

ASSISTANT SECRETARY

FEE FOR FILING THIS DOCUMENT:
\$87.50-Active Corporation
\$35.00-Administratively Dissolved Corporation