P06000084814

| (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: |
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| |
| |
| Office Use Only |



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09/30/08--01026--020 **122.50



Alexin 10-8-08

COVER LETTER

| SUBJECT: R and R Pressure Cle | (Name of Corporation) |
|--|--|
| DOCUMENT NUMBER: P06000 | 0084814 |
| The enclosed Resignation of Register | red Agent for a Corporation and fee are submitted for filing |
| Please return all correspondence con- | cerning this matter to the following: |
| Richard Rodriguez (305)586-100 | 00 |
| (Name of Person | n) |
| R and R Pressure Cleaning, Cor | p. |
| (Name of Firm/Com | npany) |
| 14511 SW 160 Ct. | |
| (Address) | |
| Miami, FL 33196 | |
| (City/State and Zip | Code) |
| For further information concerning the | nis matter, please call: |
| Robert Martinez | at (305) 632-9208 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

CR2E046(08/05)

THE REAL PROPERTY.

FILED

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

2008 SEP 30 PM 2: 56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, |
|--|
| Florida Statutes, the undersigned, Richard Rodriguez |
| (Name of Registered Agent) |
| hereby resigns as Registered Agent for R Pressure Cleaning, Corp. |
| (Name of Corporation) |
| P06000084814 |
| (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. |
| If signing on behalf of an entity: |
| (Typed or Printed Name) |
| |
| (Capacity) |

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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
Tailahassee, FL 32314