P06000105156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R.A. Lesesne

C.COULLIETTE

AUG 07 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL DIGITAL FILES SYSTEMS CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P06000105156

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SILFIDES ATALA
(Name of Person)

(Name of Firm/Company)

8661 YUKON CT
(Address)

ST. JAMES CITY FL 33956
(City/State and Zip Code)

For further information concerning this matter, please call:

SILFIDES ATALA at (239) 313-0105
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for $35.00 made payable to the Florida Department of State:

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

CR2E044(08/05)

①

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, SILFIDES ATALA
(Name of Registered Agent)

hereby resigns as Registered Agent for ALL DIGITAL FILES SYSTEMS CORPORATION,
(Name of Corporation)

P06000105156
(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.

Silfides R. Ayala
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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TALLAHASSEE, FLORIDA

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$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

State of Florida, County of Lee
The foregoing instrument was acknowledged before me this 3rd day of August, 20 09 by Silfides Ayala, who is personally known or produced ID FLDL

Notary Signature

MICHELLE FLOREZ
Notary Public, State of Florida
Commission# DD746358
My comm. expires Jan. 6, 2012

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, SILFIDES AYALA
(Name of Registered Agent)

hereby resigns as Registered Agent for ALL DIGITAL FILES SYSTEMS CORPORATION,
(Name of Corporation)

P06000105156
(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.

Silfides R. Ayala
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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State of Florida, County of Lee
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Notary Signature

MICHELLE FLOREZ
Notary Public, State of Florida
Commission# DD746358
My comm. expires Jan. 6, 2012

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