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LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time Mail out Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability **Domestication** Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other **Examiner's Initials**

CR2E031(7/97)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607	7.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	2.0502(2), 617.0502(2), 607.1509, or 617.1509, ELLIOTT'S BUSINESS SERVICES (Name of Registered Agent)	
hereby resigns as Registered Agent for _	(Name of Corporation)	
P06000147731		
(Document Number, if known)	-	
A copy of this resignation was mailed to t	he above listed corporation at its last known address.	
The agency is terminated and the office dithis statement is filed.	iscontinued on the 31st day after the date on which	
(Signa	ature of Resigning Agent)	
If signing on behalf of an entity:		
EDV	WARD D ELLIOTT	
(Ту	ped or Printed Name)	
PRESIDENT		

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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)