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(Requestor's Name) (Address) (Address)	100207933441
(City/State/Zip/Phone #)	10/31/1101002008 **87.50
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 29, 2011

JUL 05 2011

RECEIVED

DAVID M. GARVIN DAVID M. GARVIN, P.A. 200 SOUTH BISCAYNE BLVD., SUITE 3150 MIAMI, FL 33131

DAVID M. GARVIN, P.A.

SUBJECT: ALPHA OMEGA TEMPORARY SERVICES, INC. Ref. Number: P06000154989

We have received your document for ALPHA OMEGA TEMPORARY SERVICES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$87.50.

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 211A00015669

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www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Alpha Omega Temporary Services, Inc. (Name of Corporation)

DOCUMENT NUMBER: <u>P06000154989</u>

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:

M. Garvin (Name of Person) David m. Garvin, P.A. (Name of Firm/Company) South Biscayne Blud, Suite 3150 (Address) 200 miami, Florida 33131 (City/State and Zip Code) For further information concerning this matter, please call:

David <u>M. Gavvin</u> at (<u>305</u>) <u>301-8101</u> (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned, <u>David M. Garvin</u> (Name of Registered Agent)	
hereby resigns as Registered Agent for <u>Alpha Omega Temporary</u> (Name of Corporation)	Services, Inc.
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	
The agency is terminated and the office discontinued on the 31st day after the date o this statement is filed.	n which
If signing on behalf of an entity:	
(Typed or Printed Name)	FILED 11 OCT 31 PM SEGRE LARY OF
(Capacity)	F SIALE
Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved withdrawn corporation	V
Make checks payable to Florida Department of State and mail to: Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314