

PO700006373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

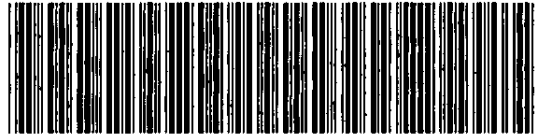
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

20

Office Use Only



400175124074

04/12/10--01029--015 \*\*35.00

KA [Signature]

FILED  
10 APR 12 AM 11:48  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Roberts APR 13 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THE LAMINATE FLOOR COMPANY AND KITCHEN CABINETS, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000063743

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:

JEANNIE MURPHY

(Name of Person)

MARING BOOKKEEPING SERVICE, INC.

(Name of Firm/Company)

5795 ORANGE DRIVE

(Address)

DAVIE, FLORIDA 33314

(City/State and Zip Code)

For further information concerning this matter, please call:

JEANNIE MURPHY at ( 954 ) 792-5075  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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**

**FILED**  
10 APR 12 AM 11:48  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE  
CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, ANNE R FONTANA  
(Name of Registered Agent)

hereby resigns as Registered Agent for THE LAMINATE FLOOR COMPANY AND KITCHEN  
(Name of Corporation)

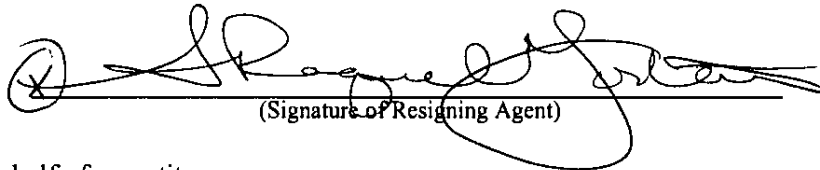
CABINETS, INC.

P07000063743

(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.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

ANNE R FONTANA

(Typed or Printed Name)

R/A

(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  
Tallahassee, FL 32314