P01000134304

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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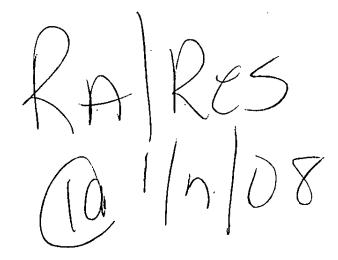


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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER

Division of Corporations	
SUBJECT: LUPINE, INC.	
(Name of Corporati	on)
DOCUMENT NUMBER: P07000134304	
The enclosed Resignation of Registered Agent for a Corpora	ation and fee are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
GLENN B. GREVENGOED	
(Name of Person)	
GLENN B. GREVENGOED, P.A.	
(Name of Firm/Company)	•
2801 OCEAN DRIVE, #201	
(Address)	•
VERO BEACH, FL 32963	
(City/State and Zip Code)	•
For further information concerning this matter, please call:	
GLENN GREVENGOED at (772 (Area Code) 234-5600 & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, _GL	ENN B. GREVENGOED	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for LUPINE, INC.		
	(Name of Corporation)	
P07000134304		
(Document Number, if known)		
A copy of this resignation was mailed to	o the above listed corporation at its last known address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which	
	(Phicagina Agent)	
(5)	gnature of Resigning Agent)	
If signing on behalf of an entity:	,	
	DIVIO S	
	OS STONE	
	Typed or Printed Name) REC 29 RECORPORE FILE OF S OF S	
	2	
	(Capacity)	
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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