P07411

(Requestor's Name)			
(Requestor's Name)			
III Eight Aue			
(Address)			
Newyork Ny 10011 (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:			
opeoids instructions to 1 ming offices.			





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03/29/11--01017--018 **350.00



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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 61	7.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
	THE ROBERT D. OLSON CORPORATIO	N.
hereby resigns as Registered Agent for	(CA_DOM_)	
	(Name of Corporation)	
P07411		
(Document Number, if known)		
A copy of this resignation was mailed to	the above listed corporation at its last ki	nown address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the dat	te on which
(Sig	gnature of Besigning Agent)	- AR
		29 AM
If signing on behalf of an entity:		
C T CORPORAT	TON SYSTEM - THERESA ALFIERI	9.
(Typed or Printed Name)	
AS:	SISTANT SECRETARY	
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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