PDIVUI

(Re	equestor's Name)	
(Ad	ldress)	
()	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number	1
(,	•
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
		,

Office Use Only



200219354972

01/25/12--01018--011 **175.00

12 JAN 25 PH 3: 53

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ROS ROS ROS



CT Corporation

111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctcorporation.com

January 19, 2012

RE: FFP ADVISORY SERVICES INC. (MO.DOM.)

GAYLORDS NATIONAL CORPORATION. (NY.DOM,)

THE HOSPITAL TRUST LEASING CORPORATION. (RI.DOM.)

LANDFORM ENGINEERING COMPANY. (MN.DOM.)

NOODLE KIDOOLE, INC. (DE.DOM.)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is $\underline{1}$ check in the amount of $\underline{\$ 175.00}$ to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections	607.0502(2), 617.0502(2), 607.1509, or 617.150	9,	
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM		
. , , , ,	(Name of Registered Agent)	 -	
hereby resigns as Registered Agent for	FFP ADVISORY SERVICES INC. (MO DOM.) (Name of Corporation)	•	
P07661			
(Document Number, if known)			
A copy of this resignation was mailed	to the above listed corporation at its last known a	address.	
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on v	vhich	
	Real :		
(S	Signature of Resigning Agent)	'	
If signing on behalf of an entity:			
C T CORPORA	TION SYSTEM - THERESA ALFIERI	12	
	(Typed or Printed Name)	JAN	<u>₹</u> 2
		25	유조-
ASSISTANT SECRETARY			357
	(Capacity)	PH 3:	2000 2000
		5 A	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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