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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Phone

: (212)431-5000

Fax Number

: (212)431-1441

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

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## REGISTERED AGENT RESIGNATION TEDDIE'S I, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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180108/11

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TEDDIE'S 1, INC.
(Name of Corporation)  DOCUMENT NUMBER: P08000001235
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:
Stephanie Wright
(Name of Person)
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, N.Y. 10013
(City/State and Zip Code)
For further information concerning this matter, please call:
Stephanie Wright at 800 221-2972 ext. 552
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Mulling Address:  Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314  Street Address: Amendment Section Division of Corporations Pivision of Corporations Tallahassee, FL 32319

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509	<b>,</b>
Florida Statutes, the undersigned, Blumberg Excelsior Corporate Services	, Inc.
(Name of Registered Agent)	i
hereby resigns as Registered Agent for TEDDIE'S 1, INC.	<u> </u>
(Name of Corporation)	
P08000001235	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known a	ıddress.
The agency is terminated and the office discontinued on the 31st day after the date on v	vhich,
this statement is filed.	
the last	
(Signature of Resigning Agent)	•
If signing on behalf of an entity:	
Marc D. Moel	•
(Typed or Printed Name)	in.
Asst. Secretary	部品

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

(Capacity)