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RA Resignation

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Calusa Flooring Systems, Inc. (Name of Corporation)		
DOCUMENT NUMBER: POSOOO 2030		
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:		
Bryan Welche (Name of Person)		
(Name of Firm/Company)		
2034 BaySide PKWY (Address)		
For T Myers, Fl. 33901 (City/State and Zip Code)	; : :	
For further information concerning this matter, please call:	<u>.</u>	
(Name of Person) (Afea Code & Daytime Telephone Number)		
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corpor \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.	oration	

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned. Bryen Welch (Name of Registered Agent)
hereby resigns as Registered Agent for Calusa Flooring SysTem (Name of Corporation)
POSODO 20380 (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.
Sm Wohl (Signature of Resigning Agent)
If signing on behalf of an entity:
Bryan Welch (Typed or Printed Name)
Res Gyent (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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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