

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : ALA REGISTERED AGENT INC.
Account Number : I20090000032
Phone : (866) 703-8828
Fax Number : (561) 202-8082

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

Email Address: _____

RECEIVED
2010 APR -5 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT RESIGNATION
THE BREAD OF LIFE CAFE INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

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B. CONNELL APR 05 2010

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**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, A1A REGISTERED AGENT, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for THE BREAD OF LIFE CAFE INC.

(Name of Corporation)

P08000091719

(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.

Tina Maki

(Signature of Resigning Agent)

If signing on behalf of an entity:

TINA MAKI

(Typed or Printed Name)

PRESIDENT

(Capacity)

10 APR - 5 PM 4:10

FILED

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withdrawn corporation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**

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