

**Florida Department of State**  
**Division of Corporations**  
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To:

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

From:

Account Name : A1A REGISTERED AGENT INC.  
 Account Number : I20090000032  
 Phone : (866) 703-8020  
 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: \_\_\_\_\_

**REGISTERED AGENT RESIGNATION**  
**TERRIFIC PARENTING CORP.**

Certificate of Status	0
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Page Count	02
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RECEIVED  
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 TALLAHASSEE, FLORIDA

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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 TERRIFIC PARENTING CORP.

(Name of Corporation)

P09000000631

(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.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

TINA MAKI

(Typed or Printed Name)

PRESIDENT

(Capacity)

2010 AUG -3 PM 2:15  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporationMake checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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