

PO 9000032134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

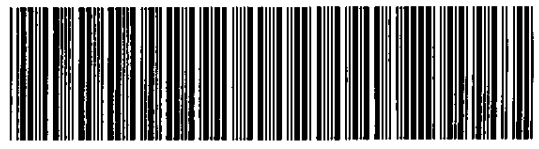
(Business Entity Name)

(Document Number)

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STUDY STAFF
TALLAHASSEE, FLORIDA

28 SEP -6 PM 3:49

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OCEAN DRIVE RECOVERY RESORTS - MANSION, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000032134

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:

KUTOFF, ELIYAHU M
(Name of Person)

(Name of Firm/Company)

~~1835 NE MIAMI GARDENS DRIVE Suite 125~~
(Address)

*675 NE 172nd Street
Miami, FL 33142*

~~NORTH MIAMI BEACH FL 33179 US~~
(City/State and Zip Code)

For further information concerning this matter, please call:

KUTOFF, ELIYAHU M at (305) 804 2594
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 22, 2011

ELIYAHU M. KUTOFF
675 NE 172ND STREET
MIAMI, FL 33162

SUBJECT: OCEAN DRIVE RECOVERY RESORTS - MANSION, INC.
Ref. Number: P09000032134

We have received your document for OCEAN DRIVE RECOVERY RESORTS - MANSION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE PROVIDE REGISTERED AGENT SIGNATURE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 011A00015887

RECEIVED
11 SEP -6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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, KUTOFF, ELIYAHU M
(Name of Registered Agent)

hereby resigns as Registered Agent for OCEAN DRIVE RECOVERY RESORTS - MANSION, Del
(Name of Corporation)

P09000032134
(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:

Eliyahu M Kutoff
(Typed or Printed Name)

Registered Agent
(Capacity)

2011 SEP -6 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**