Division of Corporations Electronic Filing Cover Sheet

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(((H12000070893 3)))



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To:

Division of Corporations

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From:

Account Name : INCORPORATING SERVICES FL

Account Number : 120050000052 : (302)531-0855 Phone

Fax Number

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

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REGISTERED AGENT RESIGNATION SYG ENTERPRISES INC.

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SYG ENTERPRISES INC.	Name of Corporation)
	• •
DOCUMENT NUMBER: P09000078	126
The enclosed Resignation of Registered A	gent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
TUNISHA SCOTT	
(Name of Person)	
INCORPORATING SERVICES, LTD.	
(Name of Firm/Company)	
3500 S. DUPONT HWY,	·
(Address)	
DOVER, DE 19901	
(City/State and Zip Code)	
For further information concerning this ma	tter, please call:
TUNISHA SCOTT	at (800) 346-4646
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Fi or \$35.00 for an administratively dissolved	orida Department of State for \$87.50 for an active corporation, voluntarily dissolved or withdrawn corporation.
Amendment Section Amer Division of Corporations Divis Clifton Building Post	ng Address: adment Section ion of Corporations Office Box 6327 assee, FL 32314

CR2E046(08/05)

FINO. 7248 P. 3

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RESIGNATION OF REGISTERED AGENCRETARY OF STATE FOR A CORPORATION TALL AHASSEE, FLORID

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, INCORPORATING SERVICES LTD. Florida Statutes, the undersigned, _ (Name of Registered Agent) hereby resigns as Registered Agent for SYG ENTERPRISES INC. (Name of Corporation) P09000078126 (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 discentiqued on the 31st day after the date on which this statement is filed If signing on behalf of an entity: CANDICE B. SWETLAND (Typed or Printed Name) ASSISTANT SECRETARY (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