Division of Corporations Electronic Filing Cover Sheet

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(((H120000041363)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : INCORPORATING SERVICES FL

Account Number : 120050000052 Phone

: (302)531-0855

Fax Number

: (850) 656-7953

\*\*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 DOUBLE DD INC.

Certificate of Status	0
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Estimated Charge	\$87.50

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Marin

1/5/2012

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	JECT: DOUBLE DD INC.	
	(Name of Corporation)	
DOC	UMENT NUMBER: P10000083388	
The e	enclosed Resignation of Registered Agent for a Corporation and f	ee are submitted for filing.
Please	e return all correspondence concerning this matter to the following	eg:
TUN	NISHA SCOTT	
	(Name of Person)	
INC	ORPORATING SERVICES, LTD.	
	(Name of Firm/Company)	
3500	0 S. DUPONT HWY.	
	(Address)	
DOV	VER, DE 19901	
•	(City/State and Zip Code)	
For fu	urther information concerning this matter, please call:	
TUN	IISHA SCOTT at ( 800 ) 346-46	546
	(Name of Person) (Area Code & Daytime	Telephone Number)

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

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	7070	
Pursuant to the provisions of section	ns 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, _	INCORPORATING SERVICES LTD.	,
,	(Name of Registered Agent)	ſ
hereby resigns as Registered Agent	for DOUBLE DD INC.	
	(Name of Corporation)	
P10000083388		
(Document Number, if known)	<del></del>	
A copy of this resignation was mail	ed to the above listed corporation at its last known address.	
	fice discontinued 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
Tallabassee, FL 32314