P10000099767

, e

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400215182834

12/15/11--01009--007 **87.50

SECURIARY OF STATE

PARES LOD

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: West flocked Oceanus (Name of Corporation)
DOCUMENT NUMBER: PI 00000 997 67.
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:
EDWARD Ren6: FO. (Name of Person)
Wast Flobell Clemens (Name of Firm/Company)
13910 SW 175 terroce (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
Emplo Gen6 (Name of Person) at (305) 439 4401 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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,		
hereby resigns as Registered Agent for West House Claudents,		
(Name of Corporation)		
(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:	DEC 15 PM	E
(Typed or Printed Name)	3: 55	
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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