## P11005

(Requestor's Name)			
(Address)			
(Address)			
(radioss)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



800159876078

11/23/09--01002--014 \*\*210.00

FILED

MIN NOV 20 P 4: 32

SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

la Resign



111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

November 13, 2009

RE:	SRS COMMUNICATIONS CORPORATION	(CT. DOM.)
	SMITH TECHNOLOGY CORPORATION	(DE. DOM.)
	STELLENT, INC.	(MN. DOM.)
	SUNSATIONS SUNGLASS COMPANY	(IN. DOM.)
	SURGICAL INSTRUMENTS REPAIR SERVICE, INC.	(MI. DOM.)
	TALON ACCEPTANCE CORPORATION	(FL. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$210.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

## Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

rursuant to the provisions of sections of	07.0302(2), 617.0302(2), 607.1309, 6	r 617.130 <del>9</del> ,
orida Statutes, the undersigned, CT CORPORATION SYSTEM (Name of Registered Agent)		
hereby resigns as Registered Agent for	(Name of Corporation)	,
P11005		
(Document Number, if known)	_	
A copy of this resignation was mailed to	o the above listed corporation at its las	st known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the	date on which
(Signing on behalf of an entity:	gnature of Resigning Agent)	THE NOV 2
C T CORPORAT	TION SYSTEM - THERESA ALFIERI	SEX O III
	Typed or Printed Name)	
AS	SISTANT SECRETARY	H: 32 STATE LORIDA

## 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)

, . .×