P/2000024834

| (Requestor's Name) |
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| (Address) |
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| (C). (C) (Z)(D) 49 |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| , , |
| (Document Number) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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04/02/12--01020--015 **35.00

04/19/12--01005--006 **52.50

fA Resign

12 APR 03 PH 21 00
SECRETARY OF STATE

APR 1.9 2012 T. ROBERTS



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 3, 2012

LUTITIA TURNER GREEN THUMB RECOVERY, INC POBOX9 NEW CASTLE, VA 24127

SUBJECT: GREEN THUMB RECOVERY, INC.

Ref. Number: P12000024834

We have received your document for GREEN THUMB RECOVERY, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

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) 245-6050.

Tina Roberts Regulatory Specialist II

Letter Number: 212A00010866



COVER LETTER

| TO: | Amendment Section Division of Corporations |
|---------|--|
| SUBJ | ECT: GREEN THUMB RECOVERY INC |
| DOCI | (Name of Corporation) UMENT NUMBER: P12000024834 |
| | |
| The en | nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| LUTI | ITIA TURNER |
| ****** | (Name of Person) |
| GRE | EN THUMB RECOVERY INC |
| | (Name of Firm/Company) |
| PO E | 3OX 9 |
| | (Address) |
| NEW | VW CASTLE, VA 24127 |
| | (City/State and Zip Code) |
| For fur | rther information concerning this matter, please call: |
| CHAI | RLES R. WINTZ (Name of Person) at (904) 389-7111 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

- **3**745-14

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the pro | visions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, | |
|---|--|--|
| Florida Statutes, the undersigned, WILLIAM HUGHES | | |
| | (Name of Registered Agent) | |
| hereby resigns as R | egistered Agent for GREEN THUMB RECOVERY INC. | |
| | (Name of Corporation) | |
| P12000024834 | | |
| (Document N | imber, if known) | |
| A copy of this resig | nation was mailed to the above listed corporation at its last know raddless. | |
| this statement is fil | | |
| _6 | William Wychu (Signature of Resigning Agent) | |
| If signing on behalf | of an entity: | |
| | LUTITIA TURNER | |
| | (Typed or Printed Name) | |
| | PRES Lutitia Turner | |
| | (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