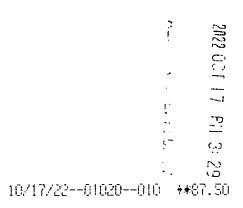
P22000027060

(Red	questor's Name)	<u>_</u>	
(Add	dress)		
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(City	//State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
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(Document Number)			
Certified Copies	Certificates	s of Status	
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COVER LETTER

FO: Amendment Section Division of Corporations	
·	
DEEP ZOO. INC SUBJECT:	
(Name of Corporat	ion)
DOCUMENT NUMBER: <u>P22000027060</u>	
The enclosed Resignation of Registered Agent for a Corpor	ation and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
WILLIAM HAHN	
(Name of Person)	-
DEEP ZOO, INC	
(Name of Firm/Company)	-
101 SE 10TH COURT	
(Address)	-
DEERFIELD BEACH, FL 33441	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
WILLIAM HAHN 561	479-8123) : & Daytime Telephone Number)
(Name of Person) (Area Code	& Daytime Telephone Number)

Enclosed is a check maderpayable 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, F1, 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or	617.1509.
Florida Statutes, the undersigned.	ERIC HERMAN	
Thomas Me andersigness	(Name of Registered Agent)	
hereby resigns as Registered Agen	, c., DEEP ZOO, INC	
hereby resigns as Registered Agen	(Name of Corporation)	
P22000027060		
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation at its last	t known address.
The agency is terminated and the of this statement is filed.	office discontinued on the 31st day after the	date on which
	(Signature of Resigning Agent)	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
	ERIC HERMAN	C
•	(Typed or Printed Name)	
	•	- ,
	(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