P26498

(Re	equestor's Name)		
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(Cit	ry/State/Zip/Phone	e #)	
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RA Resign 2-4-08 Dc

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT: MAP Management Assistance Programs, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P26498
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Gise	ela Fasco
	(Name of Person)
Broa	ad and Cassel
	(Name of Firm/Company)
2 Sc	outh Biscayne Boulevard, 21st Floor
	(Address)
Miar	mi, Florida 33131
	(City/State and Zip Code)
For fu	urther information concerning this matter, please call:
Gise	(Name of Person) at (305) 373-9419 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 sec	ions 607.0502(2), 617.0502(2), 607.1509, or 61	17.1309,
Florida Statutes, the undersigned	B & C Corporate Services, Inc. (Name of Registered Agent)	
	• • • • • • • • • • • • • • • • • • • •	_
nereby resigns as Registered Age	nt for MAP Management Assistance Progr	rams, Inc.
	(Name of Corporation)	
P26498		
(Document Number, if known		
A copy of this resignation was m	ailed to the above listed corporation at its last ki	nown address.
The agency is terminated and the his statement is filed.	office discontinued on the 31st day after the da	te on which
J.	ela fares	_
,	(Signature of Resigning Agent)	
f signing on behalf of an entity:		
Gisela Faso	o	
	(Typed or Printed Name)	- Fas
		EC 8
Vice Preside	ent	D8 JAN 30 ECRETAR? LL AHASS
	(Capacity)	30 30 AR)
\$87.5	or filing this document: Or Active corporation Or Administratively dissolved/voluntarily dissoluted	PH 4: 06 CEFLOPIO Aved

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation