## P35466

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only

3410



800163421588

03/02/10--01029--019 \*\*822.50

in company in the manual

TO SUS SMITH COMMITTEE

REAHASSEE, FLORIDA

And J

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Acquisition Industries, Inc.  (Name of Corporation)
DOCUMENT NUMBER: P35466
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:
Joel H. Farkas
(Name of Person)
Acquisition Industries, Inc.
(Name of Firm/Company)
8103 E Prentice Avenue, Suite 220
(Address)
Englewood CO 80111
(City/State and Zip Code)
For further information concerning this matter, please call:
Joel Farkas at () (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 6	07.0502(2), 617.0502(2), 607.1509, or 617.15	509,
Florida Statutes, the undersigned,Do	n H. Lester	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Acquisition Industries, Inc.	
	(Name of Corporation)	······································
P35466		
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed to	the above listed corporation at its last know	n address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date or	ı which
If signing on behalf of an entity:	gnature of Resigning Agent)	2010 HAR -2
(*	Typed or Printed Name)	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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