•	Requestor's Name	
соргор (C T Corporation System 1633 Broadway New York, NY 10019 212 246 5070 One #	Office Use Only
CORPORA	TION NAME(S) & DOCUMENT NUM	IBER(5), (II KNOWN):
1	(Corporation Name) (Do	cument #)
2	(Corporation Name) (Do	xument #)
3.		
	(Corporation Name) (Do	xument #)
4	(Corporation Name) (Do	cument #)
Walk in Mail out NEW FILINGS Profit	Pick up time Will wait Photocopy AMENDMENTS Amendment	Certified Copy Certificate of Status 9000022448097 -07/23/9701031014 *****35.00 *****35.00
NonProfit	Resignation of R.A.) Officer/Direc	101. 201. 201.
Limited Liability	Change of Registered Agent Dissolution/Withdrawal	
	Dissolution within awar	
Domestication Other	Merger	FILED 7 JUL 23 MI 8: 39 ECRETARY OF STATE LLAHASSEE, FLORIDA



Florida Department of State, Jim Smith, Secretary of State



RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statues, the

undersigned,C T CORPORATION SYSTEM	hereby resigns as			
(name of registered agent) Registered Agent for STEFANART, INC.				
(name of corporation)				
ORGANIZED UNDER THE LAWS OF THE STATE OF	TENNESSEE			
A copy of this resignation was mailed to the above listed as a set in the tract				

A copy of this resignation was mailed to the above listed corporation at its last known address. c/o Richard Rapacki P. O. Box 2299 Little Rock AR 92203

The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.

SIGNATIO ЯE

ASSISTANT SECRETARY

FEE FOR FILING THIS DOCUMENT: \$87.50-Active Corporation \$35.00-Administratively Dissolved Corporation

Division of Corporations - P. O. Box 6327 - Tallahassee, FL 32314 CR2E046 (7-90)