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NANCY J CASS 08-95
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TAMPA, FL 33608-4137

0972

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7-22 97

03-169/031
28

PAY TO THE
ORDER OF

Florida Department of State

\$87.50

Eighty-seven

50w DOLLARS



101 East Kennedy Boulevard
Tampa, Florida 33602

Costwalla, Carnichael

for Resignation of Registered Agent

⑈000972⑈ ⑈063104697⑈

Linda Lanan
⑈40797538⑈

R-95%

813 253 2284

08-11-97 10:47AM P002 #11

- 1. (Corporation Name) _____ (Document #) _____
- 2. (Corporation Name) _____ (Document #) 500002248435
- 3. (Corporation Name) _____ (Document #) 07-15-97-01113-015
- 4. (Corporation Name) _____ (Document #) ***87.50*** 87.50

- Walk in Pick up time _____ Certified Copy
- Mail out Will wait Photocopy Certificate of Status

FILED
97 JUL 25 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*RA Resignation
8/11/97
[Signature]*

Examiner's Initials [Signature]

Florida Department of State, Sandra B. Mortham, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Nancy J. Cass
(Name of registered agent)

hereby resigns as Registered Agent for Coolwala Carnival, Inc.
(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

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

Nancy J. Cass
(Signature of resigning agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

97 JUL 25 PM 12: 26

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