P93000088431

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

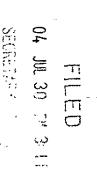
Office Use Only



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RA Resign



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PRESELVED SECURITIES GROUP (Name of Corporation) P9300008843)
DOCUMENT NUMBER: P9300008843)
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:
(Name of Person)
(Name of Firm/Company)
12426 NW 6300 ST (Address)
CONAL SININGS FL 330760 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (47) 346 494) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

04 FILED		
RESIGNATION OF REGISTERED AGENT FOR A CORPORATION		
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned, VICTON GSSINGER (Name of Registered Agent)		
hereby resigns as Registered Agent for Prefer Securities 6my P. Inc., (Name of Corporation)		
P 930000 8843] (Document Number, if known)		
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. (Signature of Resigning Agent)		
If signing on behalf of an entity:		
(Typed or Printed Name)		
(Typed of Finited Name)		
(Capacity)		

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

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

Fee for filing this document: \$87.50 - Active corporation