CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

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Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Past Due Amounts Past 30 Days, 15% per Annum.

THANK YOU from
Your Capital Connection

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 Statues, the undersigned, Capita	1 Connection, Inc.
	(Name of registered agent)
hereby resigns as Registered Agent for_E	Equicorp Corporation .
	(Name of corporation)
A copy of this resignation was mailed to the	ne above listed corporation at its last known address.
The agency is terminated and the office dis	scontinued on the 31st day after the date on which
this statement is filed.	
A Signature	fre of resigning agent)
If signing on behalf of an entity:	AR 20
Weimar Lopez	Eng. PA
. (Typed or Printed Name)	2: 26 FLOR
Registered Agent Coordinator (Capacity)	RICH P

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation