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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PHONE	()		
		Regular Two Day Service	
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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, 18% 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), 607.1	1509, or 617.1509,				
Florida Statues, the undersigned, Capital Connection. Inc.					
(Name of registered age	int)				
hereby resigns as Registered Agent for Fold-A-Way Systems. Inc.					
	(Name of corporation)				
A copy of this resignation was mailed to the above listed corporation at i	its last known address.				
The agency is terminated and the office discontinued on the 31st day at	fter the date on which				
this statement is filed.					
15 gnature of resigning agent)	97 HAR 20 SECVELS				
If signing on behalf of an entity:	7.7				
Weimar Lopez	P III				
(Typed or Printed Name)	2: 26 2: 26 FLORE				
Registered Agent Coordinator	izimi				

Fee for filing this document:

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

(Capacity)