

P94 000034395

Requester's Name _____

Address _____

City/State/Zip _____ Phone # _____

300002697803--8
-11/16/98--01095--010
Office Use Only ***\$122.50 *****87.50

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

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

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FILED
 98 NOV 20 PM 12:38
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

RA 12-20-98

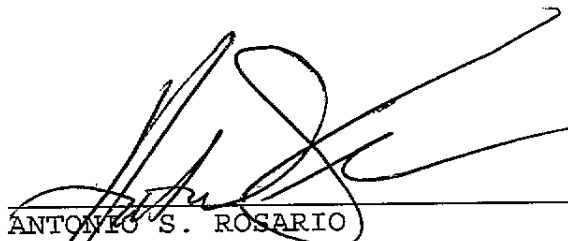
Examiner's Initials	
---------------------	--

REGISTERED AGENT RESIGNATION

November 9, 1998

FLORIDA SECRETARY OF STATE
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

I, **ANTONIO S. ROSARIO**, Registered Agent of **DEUCES OF WILES, INC.**, a Florida corporation, hereby resign from my office as Registered Agent of said corporation. I hereby certify that I have notified **DEUCES OF WILES, INC.** in writing of my resignation. My agency will terminate on the 31st day after the date on which this resignation is filed with the Secretary of State. I enclose a check in the amount of \$87.50 as a resignation fee.



ANTONIO S. ROSARIO

11/9/98

DATE

FILED
98 NOV 20 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Return to:

David A. Silverstone, Esq.
3300 University Dr., #408
Coral Springs, FL 33065
(954) 755-5350