P94000035686

| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
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| (Business Entity Name) |
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TRANSMITTAL LETTER

| SUBJECT: Jug Creek Fish Company, Inc. (Name of Corporation) DOCUMENT NUMBER: P94000035686 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: Timothy J. Bruehl (Name of Person) Waggoner & Bruehl, P.A. (Name of Firm/Company) 5400 Pine Island Road, Suite D |
|--|
| 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: Timothy J. Bruehl (Name of Person) Waggoner & Bruehl, P.A. (Name of Firm/Company) |
| Please return all correspondence concerning this matter to the following: Timothy J. Bruehl (Name of Person) Waggoner & Bruehl, P.A. (Name of Firm/Company) |
| Timothy J. Bruehl (Name of Person) Waggoner & Bruehl, P.A. (Name of Firm/Company) |
| (Name of Person) Waggoner & Bruehl, P.A. (Name of Firm/Company) |
| Waggoner & Bruehl, P.A. (Name of Firm/Company) |
| (Name of Firm/Company) |
| |
| 5400 Pine Island Road, Suite D |
| (Address) |
| Bokeelia, Florida 33922 |
| (City/State and Zip Code) For further information concerning this matter, please call: |
| Timothy J. Bruehl at (239) 283-1076 (Name of Person) (Area Code & Daytime Telephone Number) |
| (Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the pro | visions of section | ns 607.0: | 502(| 2), 617.050 | 02(2), 60 | 7.1 509 , c | or 617. | 1509, | | |
|---|--------------------|------------|---------|-----------------|-------------------------|---------------------|-------------|-------------|-------------|----------------|
| Florida Statutes, th | e undersigned, | Virgin | ia N | Morton (Name | of Register | ed Agent) | | | | |
| hereby resigns as F | Registered Agent | forJ | ug (| Creek Fis | sh Compa ne of Corpo | any, In oration) | ıc. | | , | |
| P94000035686 | | | | | | | | | | |
| (Document N | umber, if known) | | | | | | | | | |
| A copy of this resig | gnation was mai | led to the | abo | ve listed co | orporatio | at its la | st knov | wn add | iress. | |
| The agency is term this statement is fil | led. | | | | e 31st day | after the | e date o | on whi | ich | |
| _ | Virgin | (Signatur | re of] | Resigning Ag | gent) | | | | | |
| If signing on behal | f of an entity: | | | | | | • ; | SECKI | الا 05 | 1 1 |
| | Virginia Mo | rton | | | | _ | | HAS AS | <u>-</u> 2 | SCHOOL SERVICE |
| _ | | (Туре | d or P | rinted Name |) | | | SEE, F | PM 10: 06 | Sada. |
| | Director | | | | | | | STA | Ö | d-ine |
| _ | | | (Cap | pacity) | | | | . T | ىت | |

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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