PG50000 I LO I O T

Buschman, Ahern, Persons & Bankston

ATTORNEYS AT LAW

2215 SOUTH THIRD STREET, SUITE 101 POST OFFICE BOX 50008

CR2E031(1/95)

JACKBONVILLE BEACH, FLORIDA 32240-0006

Office Use Only
S), (if known):

| | 1(Corp | oration . | Name) | (Доси | ment #) | | | | |
|----|---|-----------|--|---|-----------------|--|--|-------------|----------|
| | 2. (Corporation Name) | | | (Document #) 1000203 -12/20/96 *****35. | | 203< 20/96 | 348510 -01044012 | | |
| | 3. <u>(Corp</u> | oration | Name) | (Docu | ment #) | 非米 特 | **35.UU | *** | ***35.00 |
| | 4(Corp | oration | Name) | (Docu | ment #) | <u>. </u> | · | _ | |
| | □ Walk in □ | Picl | c up time | | Certifie | d Copy | | | |
| | Mail out | | wait Photo | осору | Certific | ate of Status | TALE A | 96 DEC 20 | |
| 邁置 | NEW FILINGS | | AMENDMENTS: | | | | NT SAH | 202 | ΑP |
| | Profit | | Amendment | | | | H H | 0 / | |
| | NonProfit | | Resignation of R.A., Offi | cer/Director | | σ | √15 SI 15 ± 15 ± 15 ± 15 ± 15 ± 15 ± 15 ± 15 ± | | |
| | Limited Liability | | Change of Registered Ag | ent | 7 | 16/0 | | 45 :01 liy | D |
| | Domestication | | Dissolution/Withdrawal | | | 01 | | • | |
| | Other | | Merger | | $\exists \circ$ | | | | |
| | OTHER FILINGS Annual Report Fictitious Name Name Reservation | | REGISTRATIO OUALIFICATIO Foreign Limited Partnership Reinstatement Trademark Other | N/ ON- | | 90 JO | 96 | | |

Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

| Pursuant to the provisions of sections 607.0502(2) or 607.1 | 509, Florida Statues, the | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| 0.100101911001 | hereby resigns as | | | | | | | |
| (name of registered agent) | | | | | | | | |
| Registered Agent for Blind Willie Entertainment | t, Inc. | | | | | | | |
| (name of corporation) | | | | | | | | |
| A copy of this resignation was mailed to the above listed coaddress. | APPHOVED AND FILED FILED SECRETARY OF STATEMENT AND STATEMENT OF STATEMENT AND STATEME | | | | | | | |
| The agency is terminated and the office discontinued on the 31st day after the date on | | | | | | | | |
| which the statement was filed. | NATURE - | | | | | | | |

FEE FOR FILING THIS DOCUMENT:
\$87.50-Active Corporation
\$35.00-Administratively Dissolved Corporation

Division of Corporations - P. O. Box 6327 - Tailahassee, FL 32314 CR2E046 (7-90)