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COVER LETTER

	Division of Corporations
SUBJ	ECT: Allstates Fireproofing, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P95000028629
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
J. M	arshall Fry, Attorney at Law
	(Name of Person)
	(Name of Firm/Company)
905	East M.L. King Dr., Suite 228
	(Address)
Tarp	on Springs, FL 34689
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
J. Ma	(Name of Person) at (727) 939-0003 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E046(08/05)

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RESIGNATION OF REGISTERED AGENTAGE
FOR A CORPORATION
ASST OF TO
RESIGNATION OF REGISTERED AGENT ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, J. Marshall Fry, Attorney at Law
(Name of Registered Agent)
hereby resigns as Registered Agent for Allstates Fireproofing, Inc.
(Name of Corporation)
P95000028629
(Document Number, if known)
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
to sopy of this toolghamon was maned to the accite history conficient at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.
1)//6.W/6///The
(Signature of Resigning Agent)
If signing on behalf of an entity:
√. Marshall Fry, Attorney at Law
(Typed or Printed Name)
·
(Capacity)

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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