95000037050

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R.A. Resign

C. Coulliste NOV 0 7 19996

COVER LETTER

	Amendment Section Division of Corporations				
SUBJE	SUBJECT: LAKESIDE DEVELOPERS, INC				
	(Name of Corporation)				
DOCU	MENT NUMBER: P95000037050				
The end	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.				
Please r	return all correspondence concerning this matter to the following:				
LUIS	MACHADO				
	(Name of Person)				
<u></u>	(Name of Firm/Company)				
P.O.B	OX 520682				
	(Address)				
MIAM	I, FLORIDA 33152-0682				
	(City/State and Zip Code)				
For furt	her information concerning this matter, please call:				
LUIS	MACHADO at (305) 596-0505				
	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclose or \$35.0	d is a check made payable to the Florida Department of State for \$87.50 for an active corporation 00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.				
Amenda Division Clifton 2661 Ex	Mailing Address: ment Section n of Corporations Building cecutive Center Circle ssee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314				

CR2E046(08/05)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisi	ions of sections 6	607.0502(2), 617.0502(2), 607.1509, or 617	⁷ .1509,
Florida Statutes, the un	ndersigned, Ll	JIS MACHADO	
	<u> </u>	(Name of Registered Agent)	
hereby resigns as Regi	stered Agent for	. LAKESIDE DEVELOPERS, INC.	,
, , ,	Ü	(Name of Corporation)	
P95000037050	a da .	-	
(Document Numb	er, if known)		
A copy of this resigna	tion was mailed	to the above listed corporation at its last known	own address.
The agency is termina this statement is filed.	7	e discontinued on the 31st day after the date	on which
If signing on behalf of	an entity:	dignature of Resigning Agent) (Typed or Printed Name)	FILED 2006 NOV -6 AM SECRETARY OF S ALLAHASSEE, FL
PI	RESIDENT	(Capacity)	111: 12 STATE ORIBA

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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