## P9500095881

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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(10/10/08

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1	509,	
Florida Statutes, the undersigned, JAMES A. MARINELLI		
(Name of Registered Agent)		
hereby resigns as Registered Agent for DOMINO, INC.	,,,,,	
(Name of Corporation)		
P95000095881		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last know	vn address.	
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.  (Signature of Resigning Lent)	on which	
If signing on behalf of an entity:		
(Typed or Printed Name)	08	DIVIS
(Capacity)	08 DEC -8 AI	DIVISION OF CORPO

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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