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To:

Division of Corporations

Fax Number : (850)617-6380

From:

ë.

Account Name : FOX ROTHSCHILD LLP

Account Number : I20130000024 Phone : (215)299-2162 Fax Number : (215)299-2150

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jmiranda@foxrothschild.com

## REGISTERED AGENT RESIGNATION DELTA FOOD SYSTEMS, INC.

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections $607.0503(2)$ , $617.0502(2)$ , $607.1509$ , or $617.1509$ .	
Florida Statutes, the undersigned. Adam J Lamb	
(Name of Registered Agent)	
Florida Statutes, the undersigned.  (Name of Registered Agent)  (Name of Registered Agent)  (Name of Registered Agent)  (Name of Registered Agent)	
(Name of Capacita)	
P96000000853	1
(Document Number, if known)	المراجعة ال المراجعة المراجعة ال
(Document Number, if known)  A copy of this resignation was mailed to the above listed corporation 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.  (Signature of Resigning Agent)	
If signing on behalf of an entity:	
(Typed or Printed Name)	
Caraity	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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