P9600034309

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BOBBY ALUSON WILELESS CORPORATION (Name of Corporation) DOCUMENT NUMBER: P9600034309
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHRISTOPHER H. NORMAN (Name of Person)
HINES NORMAN HINES, P.L. (Name of Firm/Company)
315 S. HYDE PARK AVENUE (Address)
TAMPA, FL 33606 (City/State and Zip Code)
For further information concerning this matter, please call:
CHRUSTOPHER H. Norman at (613) 251-869 (Name of Person) at (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.13	509,
Florida Statutes, the undersigned, <u>CHRISTOPHER H. NORMA</u> (Name of Registered Agent)	TN_
hereby resigns as Registered Agent for BOBSI AUSON NIHLESS (Name of Corporation)	CORPORATION
P91000034309 (Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	n address.
The agency is terminated and the office discontinued on the 31st day after the date or this statement is filed.	n which
Magnonna.	marcel
(Signature of Resigning Agent) If signing on behalf of an entity:	FILI 04 APR -2 SELANT JANY ALLAHASSE
(Typed or Printed Name)	PM 4: 23 E. FLORIDA
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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