## P96000043841

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
÷

Office Use Only



600115530746

01/22/08--01047--002 \*\*35.00

PILED

08 JAN 22 PM 2: 14

SECRETARY OF STATE

White or



CT 111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

January 12, 2008

RE: ICONO, INC. (NV. DOM.)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is <u>1</u> check in the amount of <u>\$35.00</u> to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:ld Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1:	509,	
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	ICONO, INC.		
neredy resigns as Registered Agent for	(Name of Corporation)	,	
P96000043841			
(Document Number, if known)	<del></del>		
A copy of this resignation was mailed to	the above listed corporation at its last know	n address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date or	which	
R	000	08 JAN 22 SECRETAR NILLAHASS	-1
(Sig	gnature of Resigning Agent)	TAR ASS	
If signing on behalf of an entity:		řer Fer	1
C T CORPORAT	TION SYSTEM - THERESA ALFIERI	2: 14 STATE LORIG	
(	Typed or Printed Name)	77	
ASS	SISTANT SECRETARY		
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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