

P96000072981

Requester's Name

ATLANTIC COAST DISTRIBUTORS, INC.
772 Washburn Road, Melbourne Fl
P.O. Box 510127, Melbourne Beach, Fl 32951
407-255-5137 - 407-255-5378 Fax

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

200003504132--4
-12/18/00-01103-013
****157.50 *****87.50

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- Walk in
- Pick up time _____
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS

AMENDMENTS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
800 DEC 22 AM 11:48
FILED

OTHER FILINGS

REGISTRATION/QUALIFICATION

- Annual Report
- Fictitious Name

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

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PARRS
12-22-01
Wm

Examiner's Initials

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Joseph PALADIN
(Name of registered agent)

hereby resigns as Registered Agent for ATLANTIC COAST DISTRIBUTORS, INC.
(Name of corporation)

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.

[Handwritten Signature]
(Signature of resigning agent)

If signing on behalf of an entity:

Joseph Paladin
(Typed or Printed Name)

(Capacity)

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TALLAHASSEE, FLORIDA

Fee for filing this document:
\$87.50 - Active corporation
\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314