## Address

| City/S | tate/Zip | , |
|--------|----------|---|

Phone #

Office Use Only

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

| 2         | (Corporation Name) | (Doct     | ment#)                               |   |   |  |
|-----------|--------------------|-----------|--------------------------------------|---|---|--|
| 3.        | (Corporation Name) | (Дост     | ment #)                              |   | . <u>.                                   </u> |  |
| 4         | (Corporation Name) | (Doct     | ment #)                              | TASS  |   |  |
| ☐ Walk in | Pick up time       |           | Certified Copy  Certificate of State | CHET  | 98 OCT  |  |
| Mail out  | ☐ Will wait        | Photocopy | Certificate of State                 | 1355<br>145<br>147<br>147<br>147<br>147<br>147<br>147<br>147<br>147<br>147<br>147 | 9   |  |

| NEW FILINGS |                   |  |
|-------------|-------------------|--|
|             | Profit            |  |
|             | NonProfit         |  |
|             | Limited Liability |  |
|             | Domestication     |  |
|             | Other             |  |

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

| OTHER FILINGS    |
|------------------|
| Annual Report    |
| Fictitious Name  |
| Name Reservation |

| REGISTRATION/A QUALIFICATION |
|------------------------------|
| Foreign                      |
| Limited Partnership          |
| Reinstatement                |
| Trademark                    |
| Other                        |

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| Examiner's Initials |                     |  |
|---------------------|---------------------|--|
|                     | Examiner's Initials |  |



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

## 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, <u>Ellen</u> ( Lamen   |
| hereby resigns as Registered Agent for Model Fine (Name of registered agent)  (Name of registered agent)  (Name of corporation)   |
| A copy of this resignation was mailed to the above listed corporation at its last known accress.  |
| The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.  **Copy of the continued on the 31st day after the date on which this statement is filed.  **Copy of the continued on the 31st day after the date on which this statement is filed.  **Copy of the continued on the 31st day after the date on which this statement is filed.  **Copy of the continued on the 31st day after the date on which this statement is filed.  **Copy of the copy |
| If signing on behalf of an entity:  |
|   |
| (Typed or Printed Name)   |
| (Capacity)  |
| N A 1 2/  |

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

CR2E046(7/97)