

# P96000080307

Requestor's Name

|                            |                  |
|----------------------------|------------------|
| Company name               |                  |
| CAFARO, SMITH & ASSOCIATES |                  |
| Shipper's name             |                  |
| Michael CAFARO             |                  |
| Address                    |                  |
| 311 N.E. 8TH ST            |                  |
| STE 102                    |                  |
| HOMESTEAD                  |                  |
| FL                         |                  |
| Zip code (required)        | Phone/Fax/E-mail |
| 33030                      | 305-246-5661     |

Office Use Only

NUMBER(S), (if known):

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

FILED  
00 JAN 26 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Examiner's Initials

January 26, 2000

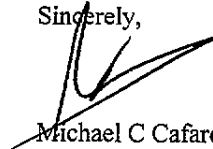
Secretary of State  
409 W Gaines Street  
Tallahassee, FL 32399  
Attn.: Ms. Carol Mustain

Ref.: BG Security Services, Inc  
P96000080307

Ms. Mustain,

Please use this letter as a form of resignation as the registered agent from the above referenced company.  
A copy of resignation was mailed to last known corporate address.

Sincerely,

  
Michael C Cafaro, CPA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

311 NE 8th  
Ste 102  
Homestead, FL 33030  
(305) 246-5661