Requ	estor's Name Address	700002) 520937—-3 798—01099—003 35.00 *****35.00		
City/State/Zip Phone #		Office Use O	Office Use Only		
CORPORATION N.	AME(S) & DOCUME	NT NUMBER(S), (if known):			
1(Corpor	ation Name)	(Document #)			
2	ation Name)	(Document #)			
3	ation Name)	(Document #)	APPF FIL 98 NAY 12 SECRETARY TALLAMASSE		
4(Corpor	ration Name)	(Document #)			
☐ Walk in ☐ Mail out ☐		Certified Copy Otocopy Certificate of State	OF STATE LED OF STA		
NEW FILINGS	AMENDMENTS		1797		
Profit	Amendment	2008	3,		
NonProfit	Resignation of R.A., O	Officer/ Director			
Limited Liability	Change of Registered	Agent			
Limited Diability					
Domestication —	Dissolution/Withdrawa	al D			
	Dissolution/Withdrawa Merger	al OND			
OTHER FILINGS		ON TON	.7		
Other OTHER FILINGS Annual Report	Merger REGISTRATI	ON/ TON	98		
Other OTHER FILINGS Annual Report Fictitious Name	Merger REGISTRATI QUALIFICAT	ON/ TON 2	gB		
Other OTHER FILINGS Annual Report	Merger REGISTRATI QUALIFICAT Foreign	ON/ TON S	28		
Other OTHER FILINGS Annual Report Fictitious Name	Merger REGISTRATI QUALIFICAT Foreign Limited Partnership	ON OCK	28		

Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

undersigned,	C T CORPORATION SYSTEM	hereby	resigns as	
Registered Agent	(name of registered agent) forATC STAFFING, INC.			
•	(name of corpo	ration)	Z A	98
ORGANIZED UNDER	THE LAWS OF THE STATE OF	FLORIDA	器	Z.
A copy of this resi address.	gnation was mailed to the above M 2800 N Military Trail Un Westchester Square W. Palm Beach, FL. 33409	it #104		
The agency is term which the stateme	ninated and the office discontinue		day after the d	ate on

FEE FOR FILING THIS DOCUMENT:

\$87.50-Active Corporation \$35.00-Administratively Dissolved Corporation

Division of Corporations - P. O. Box 6327 - Tallahassee, FL 32314 CR2E046 (7-90)