

P960000090560

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Peckell Jacksonville, Inc.

300002705613--I
-12/08/98--01009--014
****700.00 *****35.00

| | |
|-------------------------------------|-------------------------------------|
| _____ | Art of Inc. File_____ |
| _____ | LTD Partnership File_____ |
| _____ | Foreign Corp. File_____ |
| _____ | L.C. File_____ |
| _____ | Fictitious Name File_____ |
| _____ | Trade/Service Mark_____ |
| _____ | Merger File_____ |
| _____ | Art. of Amend. File_____ |
| <input checked="" type="checkbox"/> | RA Resignation_____ |
| _____ | Dissolution / Withdrawal_____ |
| _____ | Annual Report / Reinstatement_____ |
| _____ | Cert. Copy_____ |
| _____ | Photo Copy_____ |
| _____ | Certificate of Good Standing_____ |
| _____ | Certificate of Status_____ |
| _____ | Certificate of Fictitious Name_____ |
| _____ | Corp Record Search_____ |
| _____ | Officer Search_____ |
| _____ | Fictitious Search_____ |
| _____ | Fictitious Owner Search_____ |
| _____ | Vehicle Search_____ |
| _____ | Driving Record_____ |
| _____ | UCC 1 or 3 File_____ |
| _____ | UCC 11 Search_____ |
| _____ | UCC 11 Retrieval_____ |
| _____ | Courier_____ |

FILED

98 DEC -8 AM 10:55

RECEIVED

98 DEC -8 AM 8:55

Signature _____

Requested by: *WL*

Name _____

Date *12/8*

Time *8:45*

Walk-In _____

Will Pick Up _____

RESIGNATION OF REGISTERED AGENT

FILED
DEC -8 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Florida Statutes, the undersigned, Capital Connection, Inc.

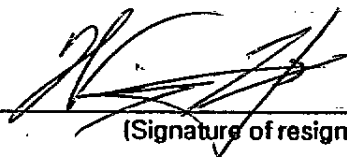
(Name of registered agent)

hereby resigns as Registered Agent for

Tekcell Jacksonville, 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.



(Signature of resigning agent)

If signing on behalf of an entity:

Weimar Lopez

(Typed or Printed Name)

Registered Agent Coordinator

(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation