P9700006641

GRAHAM, BUILDER, JONES, PRATT & MARKS

Attorneys & Counselors at Law 369 North New York Avenue Winter Park, Florida 32789 Phone (407) 647-4455 Fax (407) 647-8541

November 14, 2001

Secretary of State
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

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Re:

Resignation of Registered Agent/Melodee Holding Company, Inc.

Document No. P97000006641

Dear Sir or Madam:

Enclosed herewith please find an original executed Resignation of Registered Agent with this firm's trust account check no. \$35.00 representing the required filing fee for this document.

Please do not hesitate to call if you have any questions concerning this or require anything further. Thank you for your assistance in this matter.

Very truly yours,

Jesse Grálfam Jr., Esq.

JEGJr/em Enclosures

F:\Users\LMercado\LETTERS\Resignation of Registered Agent.wpd

FILED I DEC -3 PM 3: 50 ECKETARY OF STATO

R.A. Resignation



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 26, 2001

JESSE GRAHAM, JR., ESQ. GRAHAM, BUILDER, JONES, PRATT & MARKS 369 N. NEW YORK AVENUE WINTER PARK, FL 32789

SUBJECT: MELODEE HOLDING COMPANY, INC.

Ref. Number: P97000006641

We have received your document for MELODEE HOLDING COMPANY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign the resignation form.

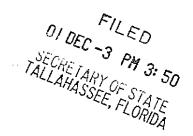
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Letter Number: 701A00062720

Teresa Brown Corporate Specialist

RESIGNATION OF REGISTERED AGENT



rusuant to the provisions of sections 607.0302(2), 617.0302(2), 607.1309, 61 617.1309,
Florida Statutes, the undersigned,
hereby resigns as Registered Agent for Melodee Holding Company, Inc. (p97000006641 (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: (Typed or Printed Name)
(1) pod 0. 1 mod 1 mmo)

Fee for filing this document:

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

(Capacity)

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