## P97000014802

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
, , , , ,			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Entity Name)			
(Decument Number)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



700136648117

10/06/08--01056--003 \*\*175.00

2008 OCT -6 PHI2: 42
SECRETARY OF STATE
SECRETARY OF STATE

R A. Rosignation

B 10

10/13/08



CT 111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

September 26, 2008

RE: OASIS RESERVATION SERVICES, INC. (DE. DOM)
OIPV CORP. (DE. DOM.)
OUTSOURCE INTERNATIONAL
OF AMERICA, INC. (FL. DOM.)
PRECEPT CORPORATION. (DE. DOM.)
SEASILVER USA INC. (NV. DOM.)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is <u>1</u> check in the amount <u>175.00</u> to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or	617.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	M
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	OUTSOURCE INTERNATIONAL OF A	MERICA, INC. (FL_DOM)_,
	(Name of Corporation)	
P97000014802		
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed t	o the above listed corporation at its last	known address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the d	
If signing on behalf of an entity:	gnature of Resigning Algent)  TION SYSTEM - THERESA ALFIERI	FILE FILE
	(Typed or Printed Name)	一 空 主 〇
	SISTANT SECRETARY	12: 43 STATE PLORIUP
	(Capacity)	

## Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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