# P97000016085

## Allweiss Allweiss Babboni

ATTORNEYS AT LAW

A Partnership of Professional Associations

111-2nd Avenue N.E. • Suite 620 • St. Petersburg, Florida 33701

City/State/Zip

Phone #

Office Use Only

#### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1			2000046369524 -10/15/0101075001
(C	orporation Name)	(Document #)	****787.50 *****35.80
2			
(Corporation Name)		(Document #)	
3		(2)	
(Corporation Name)		(Document #)	
4(C	orporation Name)	(Document #)	
☐ Walk in	Pick up time	, , ,	☐ Certified Copy
☐ Mail out	☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	<u> </u>	AMENDMENTS	
Profit Not for Prof Limited Lia Domesticati Other	bility	Amendment Resignation of R. Change of Regist Dissolution/With Merger	
OTHER FILIN	GS	REGISTRATION/Q	
Annual Rep Fictitious N		☐ Foreign ☐ Limited Partners ☐ Reinstatement ☐ Trademark ☐ Other	DUALIFICATION AND STATE OF STA
↑D2E621 <i>(7/</i> 07)			Examiner's Initials
CR2E031(7/97)			10/18/01

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, \(\sum{(Name of registered agent)}\)	
hereby resigns as Registered Agent for (Name of corporation)	_
A copy of this resignation was mailed to the above listed corporation at its last known addres	s.
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)	אַם
If signing on behalf of an entity:	
(Typed or Printed Name)	OF STATE RPORATIONS

### 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