P.O. Box 45170 Address

Office Use Only

Examiner's Initials

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

1	1000039727416
(Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4.	COCCUMENTAL TO APR
(Corporation Name)	(Document #) Sスプ ω
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2),	
Florida Statutes, the undersigned, GERALA	BRENNA SPURGIN  (Name of registered agent)
hereby resigns as Registered Agent for Spur	
A copy of this resignation was mailed to the above	listed corporation at its last known address.
The agency is terminated and the office discontinue this statement is filed.	ed on the 31st day after the date on which
Genel Brenna	Spurger PALLAHAS
(Signature of resi	gnin (agent)  RY OF STATE FLORIDA
(Typed or Printe	ed Name)
(Capacit	

## Fee for filing this document:

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

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