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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.	40000	46369546 15/01 <u>-</u> -01075001
(Corporation Name)	(Document #) ****	<u>iS/01-</u> -U1U75UU1 *787.50 *****35.00
2. (Corporation Name)	(Document #)	: · · · · · · · · · · · · · · · · · · ·
3(Corporation Name)	(Document #)	
4(Corporation Name)	(Document #)	 .a
□ Walk in □ Pick up time □ Mail out □ Will wait	Certified C Photocopy Certificate	~ -
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Direct Change of Registered Agent Dissolution/Withdrawal Merger	SECRETARY OF STATE DIVISION OF CORPORATIONS O1 OCT 15 AM 10: 52
OTHER FILINGS	REGISTRATION/QUALIFICATION	<u>v</u>
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	360.
CR2E031(7/97)	Examiner's l	nitials (W

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.15	509,
Florida Statutes, the undersigned, Michael Dallwass (Name of registered agent)	
hereby resigns as Registered Agent for COOK MANGENCUL Service (Name of eorporation)	PSUSA, Lu
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 this statement is filed. (Signature of resigning agent)	DIVIS
If signing on behalf of an entity:	FILED SION OF CORP OCT 15 AP
(Typed or Printed Name)	D STATE RPORATIONS
(Capacity)	

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