

P97000027389

Holland & Knight LLP  
Requester's Name  
375 So. Calhoun Street  
Address  
425-5675  
City/State/Zip Phone #

Office Use Only

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

1. XL Care Agency of Central FL P97000027389  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

AMENDMENTS

- ☐ Amendment  
☒ Resignation of R.A. Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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-11/16/01--01017--022

\*\*\*\*\$65.00 \*\*\*\*\*35.00

RECEIVED  
01 NOV 16 AM 11:01  
DIVISION OF CORPORATION

Examiner's Initials

DR  
11/16/01

Florida Department of State,

**RESIGNATION OF REGISTERED AGENT**

FILED  
01 NOV 16 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, 617.1509, Florida Statutes, the undersigned, **INTRASTATE REGISTERED AGENT CORPORATION** hereby resigns as Registered Agent for **XL-CARE AGENCY, INC. OF CENTRAL FLORIDA**.

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 of which this statement is filed.

**INTRASTATE REGISTERED AGENT  
CORPORATION**

By:   
Name: Steven H. Hagen  
Title: Vice President

Date: 11 | 15 | 01

**FEE FOR FILING THIS DOCUMENT:**

**\$87.50 - Active Corporation**

**\$35.00 - Administratively Dissolved Corporation ✓**

**Division of Corporations - P.O. Box 6327 - Tallahassee, FL 32314**