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

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4. (Corporation Name) Walk in Pick up time Mail out Will wait		Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R.A., O Change of Registered A Dissolution/Withdrawa Merger REGISTRATION/QUAL Foreign Limited Partnership Reinstatement	Agent
	Other \	Examiner's Initials

RESIGNATION OF REGISTERED AGENT

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
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