## P97000087375

Requester's Name	
Address	30
City/State/Zip Phone #	O MAY 30 M 8:31
CORPORATION NAME(S) & DOCUMENT NUM	Office Use Only  IBER(S), (if known):
(Corporation Name)	Document #) 8000043351180 -05/30/0101101006
3	Document #)  ******35.00 ******35.00  Document #)
ļ	Document #) Certified Copy
Not for Profit Limited Liability Domestication Other  OTHER FILINGS Annual Report Fictitious Name  Resi Char Char Char Char Char Char Char Char	endment gnation of R.A., Officer/Director age of Registered Agent colution/Withdrawal ger  RATION/QUALIFICATION  ign ted Partnership statement emark

**Examiner's Initials** 

CR2E031(7/97)

## OI MAY 30 AM 8: 31 TALLAHASSEE, FLORIDA

## 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,C T CORPORATION SYSTEM (Name of registered agent)	- July - <u>12</u> July - 3
hereby resigns as Registered Agent for HOWL TOO, INC. (FL. DOM.)  (Name of corporation)	
A copy of this resignation was mailed to the above listed corporation at its last known address.  PO Box 772296 Orlando, FL 32877-2296 Attn: Colin Bowman	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.	
me all	
(Signature of resigning agent)  If signing on behalf of an entity:	
C T CORPORATION SYSTEM	
(Typed or Printed Name)	returned to the second
ASSISTANT SECRETARY	
(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
Tailahassee, FL 32314