

MAR 02-2009 15:35

KRAMER GREEN

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A.
Account Number : 073707002173
Phone : (954) 966-2112
Fax Number : (954) 981-1605

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAR -2 AM 11:06

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REGISTERED AGENT RESIGNATION

TODD J. SINGER, D.C., P.A.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$87.50

[Handwritten signature]

RECEIVED

2009 MAR -2 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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3-20-09

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Todd J. Singer, D.C., P.A.

(Name of Corporation)

DOCUMENT NUMBER: P97000083751

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert M. Kramer

(Name of Person)

Kramer Green Zuckerman Greene & Buchsbaum P.A

(Name of Firm/Company)

4000 Hollywood Boulevard, Suite 485-South

(Address)

Hollywood, Florida 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert M. Kramer

(Name of Person)

at (954) 966-2112

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Robert M. Kramer

(Name of Registered Agent)

hereby resigns as Registered Agent for Todd J. Singer, D.C., P.A.

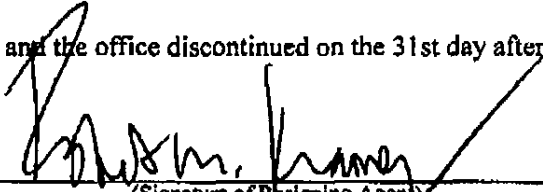
(Name of Corporation)

P97000083751

(Document Number, if known)

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 which
this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

Robert M. Kramer

(Typed or Printed Name)

Registered Agent

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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

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