## P9700086955

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone	» #)
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## TRANSMITTAL LETTER

TO: Amendment Sect Division of Corp	
SUBJECT:	NATCHEZ RESORT 1997, INC.
	(Name of Corporation)
DOCUMENT NUMBE	R:P970000086955
The enclosed Resignation	n of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondent	ondence concerning this matter to the following:
Dennis J. Eisinger, E	squire
()	ame of Person)
Phillips, Eisinger & B	
(Name	e of Firm/Company)
4000 Hollywood Bou	evard, Suite 265-S
	(Address)
Hollywood, Florida 3	3021
(City/	State and Zip Code)
For further information	concerning this matter, please call:
Jackie Gabriel	at (954) 894-8000 Ext. 241  (Area Code & Daytime Telephone Number)
(Name of	Person) (Area Code & Daytime Telephone Number)
Enclosed is a check mad or \$35.00 for an adminis	e payable to the Florida Department of State for \$87.50 for an active corporation tratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

12.3

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.	.1509,
Florida Statutes, the undersigned,	DENNIS J. EISINGER (Name of Registered Agent)	
hereby resigns as Registered Agent for	NATCHEZ RESORT 1997, INC. (Name of Corporation)	
P97000086955		
(Document Number, if known)	<del>_</del> .	
A copy of this resignation was mailed to	the above listed corporation at its last kno	own address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date	on which
(Sig	gnature of Resigning Agent)	
If signing on behalf of an entity:		O3 JUL
	Typed or Printed Name)	IL ED 18 PH 3: ARY OF STA SSEE. FLOR
	(Canacity)	

## 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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