# Pivisi Jul 28. 2883, 11:35AM Pag 1 of 2

# Florida Department of State

Division of Corporations Public Access System

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To:

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From:

Account Name : THE HOGAN LAW FIRM

Account Number : 120010000137 Phone : (352)799-8423 Fax Number : (352)799-8294 03 JUL 28 PH 1:46
SECRE ARY OF STATE
TALLAHASSEE, FI ORIOA

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DIVISION OF CORPORATIONS

## REGISTERED AGENT RESIGNATION

PROFFITT & HICKS ROOFING, INC.

Certificate of Status	
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Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

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### TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUB.	NECT: Proffitt & Hicks Roofing, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P97000106572
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Deb	orah Hogan
	(Name of Person)
The	Hogan Law Firm
	(Name of Firm/Company)
20 8	South Broad Street
<del></del>	(Address)
Broo	ksville, FL 34601
-	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Debo	orah Hogan at ( 352 ) 799-8423
	(Name of Person) at ( 352 ) 799-8423 (Area Code & Daytime Telephone Number)
Enclos or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation .00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Ameno Division P.O. B	g Address: Iment Section On of Corporations Ox 6327 Amendment Section Division of Corporations Ox 6327 409 E. Gaines Street Tallahassee, FL 32314 Tallahassee, FL 32399

\* Jul. 28. 2003 11:35AM (((H03000241723 3)))

No.3945 P. 3

### RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

03 ,,,,	FILED	
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TAMAS.	28 PH 1:46 RY OF STATE SEE, FLORIDA	

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,Deboreh McCall
(Name of Registered Agent)
hereby resigns as Registered Agent for Proffitt & Hicks Roofing, Inc.
(Name of Corporation)
P97000106572
(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:
(Typed or Printed Name)

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

(Capacity)