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Office Use Only

FILINGS, INC. TERESA ROMAN (Requestor's Name) 2805 LITTLE DEAL ROAD (Address) TALLAHASSEE, FLORIDA 32308 385-6735 OFFICE USE ONLY (City, State, Zip) (Phone #) CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1. 10 TALLY VOICE, To = (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time 200 Certified Copy Will wait Certificate of Status Mail out Photocopy **AMENDMENTS NEW FILINGS Profit** Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Other

CR2E031(10/92)

Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 8, 2005

Filings, Inc. 2805 Little Deal Road Tallahassee, FL 32308

SUBJECT: TOTALLY VOICE, INC. Ref. Number: P04000078887

197000107475 115 is the correct one

We have received your document for TOTALLY VOICE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Is Gary Crain an officer in O.M. Amir & Company Chartered? If so please state his title under "capacity" at the bottom of the page.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Document Specialist

Letter Number: 305A00015934

## 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, GA	RY CRAIN
, , , , ,	(Name of Registered Agent)
hereby resigns as Registered Agent for	TOTALLY VOICE, INC.
	(Name of Corporation)
P 97000107475	_
(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 this statement is filed.	discontinued on the 31st day after the date on which
If signing on behalf of an entity:	nature of Resigning Agent)
GARY_CRA	4 I.N. Typed or Printed Name)

Fee for filing this document:

Registered Agent

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Director

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