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(Re	questor's Name)		
(Âd	dress)		
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(Cit	y/State/Zip/Phon	e #}	
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(Bu	siness Entity Nar	me)	
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3ECRETARY OF STALE

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: See affactaal (Name of Corporation)	<u>.</u>
DOCUMENT NUMBER: <u>Ell affached</u>	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing	<u>5</u> .
Please return all correspondence concerning this matter to the following:	
Tammy Deal	
(Name of Person)	*****
PowerSports, Inc.	
(Name of Firm/Company)	
2000 N. Federal Highway	No the late to the
(Address)	•
Delray Beach, FL 33483	٠
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Tammy Deal at (561) 243-1126, ext. 4102 (Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

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

CR2E046(11/03)

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, Ro	odin Younessi	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	PowerSports of Naples, Inc.	
	(Name of Corporation)	→
P97000108235		
(Document Number, if known)		,
A copy of this resignation was mailed to	o the above listed corporation at its last known address	ss.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which .	
A Months of the Control of the Contr	gnature of Resigning Agent)	FIL 03 NOV 21
If signing on behalf of an entity:	ARY OF S	21 PHIZ: 57
Rodin Younessi	ORI ORI	or .
C	Typed or Printed Name)	-
VIII Pres	identi socratici	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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