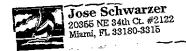
P98000022050

Requestor's Name



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.								
_	(Corp.	oration N	lame)		(Documen	t #)		
2	(Corp.	oration N	lame)		(Documen	t #)	PE C	99,
3	(Corp.	oration I	Jame)		(Documen	t #)	RE ARY	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4	(Corp	oration N	Vame)		(Documen	ıt #)	E, FLORI	
	Walk in] Pick	up time		_ [Certified Copy	RICK	9
	Mail out] will	wait	Photocop	, [Certificate of Sta	itus	
NEW	FILINGS	Tarabana Pandanda Vandanda	AMEND	MENTS		500003	: 288	73355
Profit			Amendment			-U5/ <i>c</i> *****	%5/33== :*87.5(-01077012) *****87.50
NonPro	Resignation of R.A., Offi			Director]			
Limited	l Liability		Change of l	Registered Agent				
Domes	tication		Dissolution	/Withdrawal			0	
Other			Merger]	5	\mathcal{M}_{Λ}
	ER FILINGS			STRATION/		2000 00 00 00 00 00 00 00 00 00 00 00 00		9
	us Name		Foreign				/ Ch	
	Reservation		Limited Par	rtnership] /.	DAD ON (J.	
1			Reinstatem	ent		\times \vee $/$	<i>,</i>	4
			Trademark			6	D.	`
			Other				U	

Examiner's Initials

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections of	` ' '	• • •		17.1309,
Florida Statutes, the undersigned,	JOSE SCHW	MZER		
`		=		
hereby resigns as Registered Agent for	OLYMPIA (Name	CAL	CollP.	
notoby rought as regulated rigoritor				
A copy of this resignation was mailed to	the above listed cor	poration :	at its last kr	own address.
		-		
The agency is terminated and the office this statement is filed.	discontinued on the	31st day a	after the dat	te on which
				m. i
(Si _ξ	mature of resigning agen	t)		- 75 95 - 55 95
70				AR A
If signing on behalf of an entity:				HAY 28 AHASSE
				SEL SO
				_ # 3 M
(1	yped or Printed Name)			55 = O
				35 9;
				,13
	(Capacity)			- · · · · · ·

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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