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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	

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12-19-05/PM

CFRA, LLC REGISTERED AGENT SERVICES A SUBSIDIARY OF CARLTON FIELDS

Corporate Center Three at International Plaza 4221 W. Boy Scout Blvd, 10th Floor Tampa, Florida 33607-5736 Mailing Address:
P. O. Box 3239
Tampa, Florida 33601-3239
Tel (813) 223-7000 Fax (813) 229-4133

December 16, 2005

Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Re: RESIGNATION OF REGISTERED AGENT - PARADOX LEARNING SYSTEMS, INC.

Madame or Sir:

Please find enclosed a Resignation of Registered Agent form for Paradox Learning Systems, Inc. Also enclosed is Carlton Fields' Check No. 0381807 in the amount of \$87.50 for the filing fee.

Very truly yours,

Joyge F. Bentubo

Administrative Assistant

JFB/rpd Enclosures

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607	7.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,	CFRA, LLC		
	(Name of registered agent)		
hereby resigns as Registered Agent for _	PARADOX LEARNING SYSTEMS, INC. (Name of corporation)		
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.			
If signing on behalf of an entity: Nath (Type	ure of resigning agent) naniel L. Doliner ed or Printed Name) President (Capacity) OG DECRETARY OF STATE OR IN THE SECOND OF STATE OR IN THE SECOND OR IN THE SECOND OF STATE OR IN THE SECOND OR IN THE SECOND OF STATE OR IN		

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

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