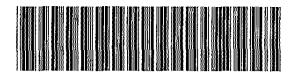
P980000040607

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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2005 FEB 21 PH 3: 10
SECRETARY OF STATE
TALLAHASSEE, FLORICA

R. A. Resignation 2-21-05

TRANSMITTAL LETTER

The Glow Miam! The
SUBJECT: Abaco Gold Miami, LnC (Name of Corporation)
DOCUMENT NUMBER: <u>\$98000040607</u>
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angela Williamson.
Abaco Gold, Inc. (Name of Firm/Company)
418 Front St. (Address)
Key West F1. 33040 (City/State and Zip Code)
For further information concerning this matter, please call:
Angela Williamso at (305) 295-1320 (Name of Person) (Area Code & Daytime Telephone Number)
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

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

TO: Amendment Section Division of Corporations

FILED

2005 FEB 21 PM 3: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Angela Williamson (Name of Registered Agent)
hereby resigns as Registered Agent for Abaco Gold Minni, Inc., (Name of Corporation)
P9800040607 (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.
Complete of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(Capacity)

Fee for filing this document:

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

5.00 - 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