

Law Offices of Harrison K. Chauncey, Jr.  
241 Bradley Place  
Palm Beach, FL 33480

City/State/Zip

Phone #

**P99000016626**

Office Use Only

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

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #) **000004315580--3**  
-05/24/01--01082--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- |                                    |                                       |  |
|------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Walk in   | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out  | <input type="checkbox"/> Will wait    | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy |                                       |  |

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

CLERK OF STATE  
TALLAHASSEE, FLORIDA

01 MAY 25 PM 1:26

**FILED**

*P99000016626*  
*5-2-01*  
*RA R2 ON*  
*268*

Examiner's Initials

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Harrison K. Chauncey, Jr.

(Name of registered agent)

hereby resigns as Registered Agent for Dempsey's Restaurant, 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.

  
\_\_\_\_\_  
(Signature of resigning agent)

If signing on behalf of an entity:

Harrison K. Chauncey, Jr.

(Typed or Printed Name)

Registered Agent

(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**

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01 MAY 25 PM 1:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA