

P99000018797

W. R. Sivley
Requester's Name

1519 Lighthouse Ct
Address

Gulf Breeze, FL 32563
City/State/Zip Phone #

Office Use Only

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

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

FILED
02 MAR 11 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900004756329--2
01/07/02 01075--003
****157.50 *****87.50

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 11, 2002

W.R. SIVLEY
1519 LIGHTHOUSE CT.
GULF BREEZE, FL 32563

SUBJECT: BIG DEAL CHARTERS, INC
Ref. Number: P99000018797

We have received your document for BIG DEAL CHARTERS, INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records do not indicate that you are an officer, director, or registered agent of the subject corporation. Therefore, no resignation is required.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6869.

Teresa Brown
Corporate Specialist

Letter Number: 102A00001733

RESIGNATION OF REGISTERED AGENT

FILED
02 MAR 11 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, MARISA A. NEWELL
(Name of registered agent)

hereby resigns as Registered Agent for BIG DEAL CHARTEES, 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:

(Typed or Printed Name)

(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