P99000031474

(R	equestor's Name)	
(Ad	ddress)	
(A	ddress)	
(Ci	ty/State/Zip/Phone #	ý)
PICK-UP	☐ WAIT	MAIL MAIL
(Bı	usin ess Entity Name)
(De	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only

RA/Res (10, 9.24.07



800109448688

09/18/07--01041--017 **87.50

01 SEP 18 AM 9: 05

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: IHS OF FLORIDA NO. 13, INC.
(Name of Corporation)
DOCUMENT NUMBER: P99000031474
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:
Mary Fink
(Name of Person)
National Corporate Research, Ltd., Inc.
(Name of Firm/Company)
615 South DuPont Highway
(Address)
Dover, DE 19901
(City/State and Zip Code)
For further information concerning this matter, please call:
Mary Fink at (800) 483-1140 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

CR2E046(08/05)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the p	rovisions of sections 6	07.0502(2), 617.05 [,]	02(2), 607.1:	509, or 617.150	9,	
Florida Statutes, the undersigned, National Corporate Research, Ltd., Inc.						
		(Name	of Registered.	Agent)	<u> </u>	
hereby resigns as	Registered Agent for	IHS OF FLORIDA NO. 13, INC.			_	
, ,	5 5	(Name of Corporation)				•
P9900003147	4					
(Document	Number, if known)	<u>ित्तर</u>	= · 노동	1 / 1 · 1 · 1 · 1		• •
A copy of this re-	signation was mailed to	o the above listed co	orporation at	its last known a	address.	
The agency is ter this statement is	minated and the office filed.	discontinued on the	e 31st day af	ter the date on w	vhich	
	Laya	e Rafanes	1 f.		07 S	DIVISION SECTION
	/ (Sig	gnature of Resigning A	gent)		7	图_
If signing on behalf of an entity:					18	ART.
	Wayne Rafanelli				AH 9:	of STAT
	(Typed or Printed Name)		25	D.K.
	Vice-President,Na	tional Corporate I	Research, L	.TD., Inc		
		(Capacity)	*#			. •

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - 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