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To:

Division of Corporations

Fax Number

: (B50)205-0380

From:

Account Name : JAMES W. GRIMSLEY

Account Number: Il9980000016

: (850)243-8194

Phone Fax Number

: (850) 664-5728

REGISTERED AGENT RESIGNATION

CAPT. MELVIN'S, INC.

Certificate of Status	0
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7/25/2005

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Capt. Melvin's, Inc. (Name of Corporation)
DOCUMENT NUMBER: P99000036145
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:
James Ward, Jr.
(Name of Person)
Capt. Melvin's, Inc. (Name of Firm/Company) 416 Calhoun Avenue (Address) Destin, FL 32541 (City/State and Zip Code)
416 Calhoun Avenue
(Address)
Destin, FL 32541 (City/State and Zip Code)
For further information concerning this matter, please call:
James W. Grimsley at (850) 243-8194
James W. Grimsley at (850) 243-8194 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for S87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

CR2E046(11/02)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60'	7.0502(2), 617.0502(2),	. 607.1509, or 617.	.1509,
Florida Statutes, the undersigned,	James W. Grimsley	istered Agent)	
hereby resigns as Registered Agent for _	Capt. Melvin's,	Inc.	
	(Name of C	Corporation)	
P99000036145		•	
(Document Number, if known)	-		
A copy of this resignation was mailed to The agency is terminated and the office d this statement is filed.			
Sign	ature of Resigning Agent)		•
If signing on behalf of an entity:			OS JUI
James	s W. Grimsley		聖公司
(T)	ped or Printed Name)		LEU ZOS ME
Register	d Agent		E 5
	(Capacity)		智思

Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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