P99000045432		
Coastal 1 3000 SR 84 Ft. Lauderdale, 76 33		
City/State/Zip	Office Use Only	
CORPORATION NAME(S) & DOC	CUMENT NUMBER(S), (11 known): 600003350596 -08/09/0001038004 	
(Corporation Name)	(Document #)	
2 (Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
4 (Corporation Name)	(Document #)	
□ Walk in □ Pick up time	Certified Copy	
☐ Mail out ☐ Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
<ul> <li>Profit</li> <li>Not for Profit</li> <li>Limited Liability</li> <li>Domestication</li> <li>Other</li> </ul>	<ul> <li>Amendment</li> <li>Resignation of R.A., Officer/Director</li> <li>Change of Registered Agent</li> <li>Dissolution/Withdrawal</li> <li>Merger</li> </ul>	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
<ul><li>Annual Report</li><li>Fictitious Name</li></ul>	<ul> <li>Foreign</li> <li>Limited Partnership</li> <li>Reinstatement</li> <li>Trademark</li> <li>Other</li> </ul>	
	Examiner's Initials	

• ...

## **RESIGNATION OF REGISTERED AGENT**

Pursuant to the provisions of sections 607	7.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	ARBARA June Wooscock
	(Name of registered agent)
hereby resigns as Registered Agent for	COASTAL 1 VACUT BROKERAGE, 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)

AUG

N

(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

CR2E046(9/98)

If signing on behalf of an entity: