

P99000053942

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(City/State/Zip/Phone #)

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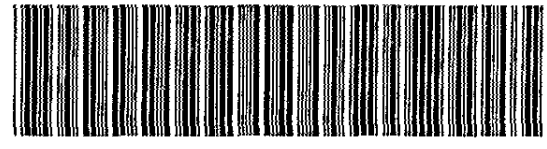
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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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04 FEB -9 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Resignation

T BROWN FEB 13 2004



Robin H. Doxey  
Juris Doctorate in Law  
Master of Laws in Taxation  
rdoxey@coxnici.com

Suite 110  
1185 Immokalee Road  
Naples, Florida 34110  
239.254.0706 Telephone  
239.254.0709 Facsimile  
www.coxnici.com

February 6, 2004

Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

*Re: Registered Agent Resignation of Crazy Productions International, Inc.  
Our File no. 3501.1*

To Whom It May Concern:

Enclosed is the Resignation of Registered Agent for the above-referenced entity, together with my client's check # 1342 in the amount of \$35, representing your filing fee. Please acknowledge receipt of the within document by stamping the duplicate copy of this cover letter and returning to me in the prepaid envelope provided.

Please feel free to contact me if you have any questions.

Very truly yours,

A handwritten signature in cursive script that reads 'Robin H. Doxey'.

Robin H. Doxey

RHD

Enclosures

cc: Marion Munoz (w/o encls.)

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Crazy Productions International, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000053942

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:

Robin H. Doxey  
(Name of Person)

Cox & Nici  
(Name of Firm/Company)

1185 Immokalee Road, Suite, 110  
(Address)

Naples, Florida 34110  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robin H. Doxey at ( 239 ) 254-0706  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

**FILED**  
04 FEB -9 AM 8:06  
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, Alexis Munoz

(Name of Registered Agent)

hereby resigns as Registered Agent for Crazy Productions International Inc.

(Name of Corporation)

P99000053942

(Document Number, if known)

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/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