0056862 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) 500004610255 -09/25/01--01046--020 ****105.00 *****35.0 (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time _ Certified Copy ☐ Mail out ☐ Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit Amendment -Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION ☐ Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other **Examiner's Initials**

CR2E031(7/97)

CR2E846(9/98)

RESIGNATION OF REGISTERED AGENT

Pursuant to the	provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 517.	1509,
	, the undersigned, Ronald Wayne Swiger (Name of registered agent)	
hereby resigns a	as Registered Agent for Gulf Coast Pride as (Name of corporation) In	<u>C. Busac</u> ola, VC.
	resignation was mailed to the above listed corporation at its last know	
The agency is t	erminated and the office discontinued on the 31st day after the date of	n which
this statement is	s filed.	
_	Konald Wayne mgu (Signature of resigning agent)	
If signing on b	ehalf of an entity:	
-	Ronald WayNE SWIGER (Typed or Printed Name)	TALL SE
S. S.	Vice President / Secratary	SEP 24 CRETARY B
OI SEP 24 AM 8: 58 Ofvision of Corporations	Fee for filing this document:	DF STATE
\$ \$	\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation	
E CO	350.00 - Auministratively transferred corporation	
101SIA)g	Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahussee, FL 32314	

\$ 35.00/xxx