## · P99000109112

(Requestor's Name) (Address)	600087563756	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	02/12/0701013017 **87.50	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED OT FEB 12 PM 4: 30 SECRETARY OF STATE FALLAHASSEE. FLORIDA	
Office Use Only	RA Rosign. 02-15-07 De	

## **COVER LETTER**

TO: Amendment Section Division of Corporations

CORAKSTONE CONSTRUCTION CORPURATION SUBJECT: P99000109112 DOCUMENT NUMBER:

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:

ER E. AYE, ESC W HIRM ame of Firm/Company) ZEELE (Address) HORIDA (City/State and Zip Co MPA

For further information concerning this matter, please call:

LTERE. HYE at (813) 254-9191 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

, <del>,</del>

· • • •

v

.....

\_...

Pursuant to the provisi	ons of sections 607.0502	- 1	/.1509, or 617.1509,	
Florida Statutes, the ur	· · · · · · · · ·	Name of Register	YE ed Agent)	
hereby resigns as Regi	stered Agent for <u>GR</u>	AYSTONE (Name of Corpo	CONSTRUCTION CE	) R. PORATI
P990001	09112			
(Document Numb	er, if known)	· · · · · · · · · · · · · · · · · · ·		
A copy of this resignat	ion was mailed to the ab	ove listed corporation	n at its last known address.	
The agency is terminat this statement is filed.	ed and the office discont	inued on the 31st day	after the date on which	
	020	G		·
	(Signatu⊮e o	Resigning Agent)	5	
If signing on behalf of	an entity:		SECRET	-
		i A	AR N F	
	(Typed or	Printed Name)		П
			For the C	フ
			COF STATE EE. FLORID	
	(C	apacity)		
		:		
	Fee for filing this d			
	\$87.50 - Active corp			
		tively dissolved/volu	intarily dissolved/	
	wiindrawn	corporation		
М		of Corporations	and mail to:	
		Box 6327 see, FL 32314		
		a K		