0.10108

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BIRAIC INC. (Name of Corporation)
DOCUMENT NUMBER: Q 10108
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 F. Asher President (Name of Person)
Resident Agents Corporation of Florida (Name of Firm/Company)
6161 Blue Laggeon Drive, Suite 350.
MIAMI FL 33126 (City/State and Zip Code)
For further information concerning this matter, please call:
Rein A D(AZ at (305) 358-8181 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Florida Statutes, the undersigned, Resident Agents Corporation of Florida (Name of Registered Agent) hereby resigns as Registered Agent for Birale, Inc. (Name of Corporation) Q10108 (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.	Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
(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	Florida Statutes, the undersigned, Resident Agents Corporation of Florida (Nume of Registered Agent)
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	hereby resigns as Registered Agent for Birale, Inc. (Name of Corporation)
The agency is terminated and the office discontinued on the 31st day after the date on which	(Document Number, if known)
	A copy of this resignation was mailed to the above listed corporation at its last known address.
(Signature of Resigning Agent) 14/44/or If signing on behalf of an entity:	(Signature of Resigning Agent) If signing on behalf of an entity:
TAMES F. AVHS 7 (Typed or Printed Name)	THMSI F. AVH37 (Typed or Printed Name)
11211211	
(Capacity) The second	(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
Tallahassec, FL 32314