

S08619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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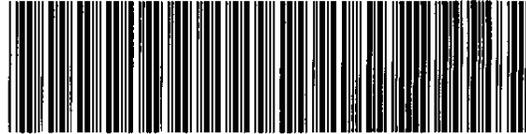
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

11 AUG 23 AM 9:42

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Teevis
8-25-11

LAW OFFICES

4431 LAFAYETTE STREET
MARIANNA, FLORIDA 32446

FRANK A. BAKER, P.A.

*BOARD CERTIFIED CIVIL TRIAL

*BOARD CERTIFIED BUSINESS LITIGATION

TELEPHONE

850.526.3633

TELECOPIER

850.526.2714

DOUGLAS WADE MERCER, ESQ. (of counsel)

MICHELLE BLANKENSHIP TAGERT, ESQ.

August 18, 2011

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Resignations of Registered Agent, Jacque Castle

Dear Sir or Madam:

Enclosed please find cover letters and resignation of registered agent forms for the following entities, along with our check in the amount of \$542.50:

- 1) Acquire I, LLLP (A00000001208)
- 2) Acquire III, LLLP (A01000000810)
- 3) Acquire IV, LLLP (A01000001429)
- 4) Acquire VII, LLP (A02000000099)
- 5) Acquire VII, LLP (A02000000099)
- 6) Acquire VIII, LLLP (A03000000315)
- 7) Acquire Land Title, Inc. (P01000111618)
- 8) Acquire Corporation (593038660)
- 9) Abstracts of North Florida, Inc. (P02000075239)
- 10) Abstract USA, Inc. (P02000123764)
- 11) Real Estate Exchange Corporation, USA (P06000038782)
- 12) Stewart Acquire II, LTD (A02000001010)
- 13) Southland Acquire Land Title, LLC (L03000041145)
- 14) Real Estate Exchange Corporation (P94000083493)

All entities are inactive except the last entry, Real Estate Exchange Corporation (P94000083493) which is still active. Please file these documents at your earliest convenience.

Should you need anything further, please let me know.

Sincerely,



MICHELLE B. TAGERT, ESQ.

Enclosures (as stated above)

MBT/ws

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

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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, HARROLL CASTLE
(Name of Registered Agent)

hereby resigns as Registered Agent for ACQUIRE CORPORATION
(Name of Corporation)

508619
(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