538470

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(R	equestor's Name)	
/A	ddress)	·
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(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
		
(B	usiness Entity Name)	,
(D	ocument Number)	
Certified Copies	Certificates of	Status
Certified Copies	Certificates of	Clarge
Special Instructions to	Eiling Officer:	
Special instructions to	Filing Officer.	
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SECRETARY OF STATE
JALLAHASSEE, FLORID!

APPROVED AND FILED

R.A.Resign

G. Soulliette FFB 0 7 2008

COVER LETTER

Many	L. Frank at (727) 372-8266
For fu	rther information concerning this matter, please call:
	(City/State and Zip Code)
New	Port Richey, Florida 34655
	(Address)
6955	Coronet Drive
	(Name of Firm/Company)
Astro	osource Services, Inc.
	(Name of Person)
Mary	L. Frank
'lease	return all correspondence concerning this matter to the following:
	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
DOCE	UMENT NUMBER: S38470
SUBJ	ECT: Astrosource Services, Inc. (Name of Corporation)
	Actuacy was Considered to a
	Division of Corporations

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 66	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, Ma	ary L. Frank	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Astrosource Services, Inc.	
	(Name of Corporation)	
S38470		
(Document Number, if known)	MAN-	
	discontinued on the 31st day after the date on which	
If signing on behalf of an entity:	Land 01/31/08 gnature of Resigning Agent)	
	Typed or Printed Name)	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)