## 559819

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PA Resign.



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DC



Suite 1400 301 East Pine Street (32801)

P.O. Box 3068

ORLANDO, FLORIDA 32802-3068

TEL 407-843-8880 FAX 407-244-5690 JACKSONVILLE

FORT LAUDERDALE

KEY WEST LAKELAND

MELBOURNE

Мілмі

NAPLES

ORLANDO

TALLAHASSEE

Тамра

Pamela O. Price

407-244-5607

PPRICE@GRAY-ROBINSON.COM

May 19, 2010

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

Re:

Resignation of Registered Agent

CDM, Inc.

Document No.: S59819

Dear Sir or Madam:

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:

Pamela O. Price GrayRobinson, P.A. P.O. Box 3068 Orlando, FL 32802-3068

For further information concerning this matter, please call:

Pamela Price at (407) 843-8880.

Enclosed is a check made payable to the Florida Department of State for \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Sincerely,

Pamela O. Price

POP/km Enclosures

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, **Pamela O. Price**, hereby resigns as Registered Agent for CDM, Inc., Document No. S59819.

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agent is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Pamela O. Price

If signing on behalf of an entity:

(Type or Printed Name)

## Fee for filing this document:

\$87.50 – Active corporation \$35.00 – Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to the Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314