# V42982

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(Re	equestor's Name)	
(Ad	ldress)	
- (Ad	ldress)	
•		
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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11/19/09--01027--025 \*\*25.00

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SECRETARY OF STATE ALLAHASSEE, FLORIN

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### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Bay Pines Travel (Name of Corporation)	<u></u>
DOCUMENT NUMBER: V42982	<del></del>
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted f	or filing.
Please return all correspondence concerning this matter to the following:	
Byon Wolf (Name of Person)	
Bay Pines Travel (Name of Firm/Company)	
8751 ulmenton Rd (Address)	
Largo FL 33771 (City State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at ()  (Area Code & Daytime Telephone Number)	<del>er)</del>
	.•

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2009

BRYAN WOLF BAY PINES TRAVEL, INC. 8751 ULMERTON RD. LARGO, FL 33771

SUBJECT: BAY PINES TRAVEL, INC.

Ref. Number: V42982

We have received your document for BAY PINES TRAVEL, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

To resign as registered agent for an inactive corporation, the enclosed resignation form should be completed and returned with a filing fee of \$35.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 509A00036770

2010 JAN II AM & BB

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections of	7.0302(2), 617.0302(2), 607.1309, 6F 617.1309,
Florida Statutes, the undersigned,	Megan Schultz (Name of Registered Agent)
	Bay Pines Travel (Name of Corporation)
V42982	_
(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 of this statement is filed.	discontinued on the 31st day after the date on which
Moga	nature of Resigning Agent)
If signing on behalf of an entity:	SECRETAR SECRETAR SPECIAL AHASS
(T	PA :
	(Canacity)

# 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