

PO5000097138

**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JUL 21 PM 3:50

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
10 PLUS HOMES, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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STATE OF FLORIDA
DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 10 PLUS HOMES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000097138

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:

Theresa Alfieri
(Name of Person)

NATIONAL REGISTERED AGENTS, INC.
(Name of Firm/Company)

111 8th Avenue, 13th Floor
(Address)

New York, NY 10011
(City/State and Zip Code)

For further information concerning this matter, please call:

Theresa Alfieri at (212) 894-8516
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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DIVISION OF CORPORATIONS
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**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, NRAI SERVICES, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for 10 PLUS HOMES, INC.

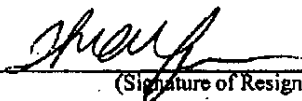
(Name of Corporation)

P05000097138

(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:

NRAI SERVICES, INC.-Theresa Alfieri

(Typed or Printed Name)

ASSISTANT SECRETARY

(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